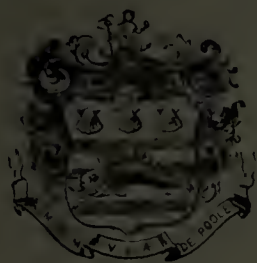


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BOROUGH OF POOLE.



Annual Report

FOR 1922

ON THE

Health and Sanitary Circumstances of the Borough

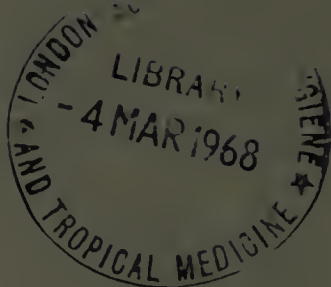
BY

R. J. MAULE HORNE,

M.A., M.B., Ch.B., B.Sc., D.P.H.

Medical Officer of Health
and School Medical Officer.

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BOROUGH AND COUNTY OF TOWN OF POOLE



ANNUAL REPORT

FOR THE YEAR 1922

ON THE

Health and Sanitary
Circumstances

OF

THE BOROUGH AND PORT OF POOLE

AND OF THE

School Medical Service
of the Borough

BY

R. J. MAULE HORNE,

M.A., M.B., Ch.B., B.Sc. D.P.H.,

*Medical Officer of Health ; School Medical Officer ;
Port Medical Officer ; Medical Superintendent
Borough Isolation Hospitals.*

PART 1	..	PUBLIC HEALTH.
PART 2	..	PORT SANITATION.
PART 3	..	MATERNITY AND CHILD WELFARE.
PART 4	..	SCHOOL MEDICAL SERVICE.

PUBLIC HEALTH DEPARTMENT.

STAFF.

Medical Officer of Health	R. J. MAULE HORNE, M.A., (HONS.) M.B., CH.B., B.Sc., D.P.H.
Sanitary Inspectors	F. ST. B. RAMSDEN, CERT. R.S.I. P. W. WHEELER, CERT. R.S.I., M.S.I.A.
Health Visitors	MRS. H. I. PARTRIDGE, C.M.B., CERT. R.S.I. MISS L. HOOPER, C.M.B., A.R.S.I. MISS B. A. SYDENHAM, CERT. NURSE. MISS M. MARRABLE, C.M.B.
Clerks	C. A. TRIM, CERT. R.S.I. F. B. EDWARDS
Junior Clerks	MISS E. H. M. NIPPARD MISS I. POLLARD
Laboratory Assistant	S. MARSHALL.
Matron, Borough Isolation Hospital	MRS. E. NIPPARD, R.R.C.
Disinfectors	H. G. NIPPARD.

PART TIME SPECIALISTS.

Ophthalmic Surgeon	ALEX. STABLES, M.B., C.M.
Nose and Throat Surgeon	S. K. HUTTON, M.B., B.S.
X-Ray Specialist	D. D. MALPAS, M.B.
Anaesthetist	J. A. C. NORMAN, M.R.C.S., L.R.C.P.
Dental Surgeons	H. S. CRAPPER, L.D.S., ENG., M.R.C.S., L.R.C.P., LOND. L. B. MYERS, L.D.S., M.B.E. R. G. S. HOLMES, L.D.S.
Public Analysts	C. G. MOOR, M.A., F.I.C. W. PARTRIDGE, F.I.C.
Veterinary Surgeon	J. S. WOOD, M.R.C.V.S.

PART I.



Public Health.

PREFACE.

To the Mayor, Aldermen and Councillors of the Borough of Poole.

I have the honour to submit my Report on the Health of the Borough for the year 1922.

This Report is of the briefer type described officially as an Ordinary Report, as will be those for the succeeding two years. The Report to be placed before you for 1925 should be of a fuller and more comparative character in order to give a summary and survey of five-yearly periods of progress, by which the Health and Sanitary Circumstances of the Borough can be seen in clearer perspective.

Meanwhile, the lines suggested by the Ministry of Health have been adopted in framing the Report.

The year has been one of consolidation of effort. If there is any outstanding feature to record, it is the continued reduction in the Borough of the incidence of Notifiable Infectious Diseases, which, as it was, was relatively light. This reduction in 1922 amounts to 50 per cent, of the total for the previous year and is a matter on which the Borough is to be congratulated.

I wish to thank the Chairman and Members of the Health Committee, the Heads of other Departments, and my entire Staff, indoor, outdoor and Hospital, for their co-operation and support.

I am,

Your obedient Servant,

R. J. MAULE HORNE.

Poole, April, 1923.

GENERAL STATISTICS.

Area of Borough. 7,964 acres ($12\frac{1}{2}$ square miles), not including 2,220 acres ($3\frac{1}{2}$ square miles) of tidal water and foreshore.

Population. (a) Estimated to mid-year 1922 from Census Return of 1921, 44,168.

(b) Estimated by Registrar General, 43,250.

Number of Inhabited Houses. 8,245 approximately.

Rateable Value, for the purpose of a Borough Rate—£220,265.
for the purpose of a District Rate, £203,171.

Sum represented by a Penny Rate. £917 15s.

The area of the Borough in proportion to the population is large, giving an average of $5\frac{1}{2}$ persons per acre.

There are 108 miles of roads, of which $38\frac{1}{2}$ miles are private roads.

Including the population of the Poole Rural District, the Town and District represent slightly less than one quarter of the total population of the County of Dorset.

CLIMATIC CONDITIONS.

There are signs that Poole is coming into its own—long overdue—as one of the most picturesque Health Resorts on the South Coast. For natural beauty as an inlet from the sea, its Harbour stands comparison with Sydney or Rio de Janeiro. For dependability of general climatic conditions, for absence of extremes of heat and cold, it holds its own with the Mediterranean Coast Resorts. Hence are found passing from choice their leisure within its boundaries, many whose more active years had accustomed them to the climatic features of India, Africa or South America.

The plateau of Parkstone and Branksome behind the older Parishes of Poole, Longfleet and Hamworthy, rises sharply at Constitution Hill and Newtown in the West and continues East to Canford Cliffs, Branksome Park and the Eastern boundary of the Borough.

The extensive enclosed waters of the Harbour, sheltered themselves by the Purbeck Hills, exert a controlling influence on the temperature, rendering the surrounding areas cool in summer and tempering the cold in winter. Hence also the town escapes many of the damp sea-mists to which the coast line is subject.

An abundance of pine woods serves also to maintain and to enhance the value of an equable climate, and to give the Borough a high claim to popularity as a recuperative resort, especially

amongst those who are liable to recurrences of Bronchitis and Asthma and those who suffer from chronic heart ailments.

PUBLIC PARKS AND PLEASURE GROUNDS.

The Borough is well supplied with open spaces, $131\frac{1}{2}$ acres being devoted to the function of "lungs" for the use of the general public, not including sands and sea-front. The situation and extent of these Parks and Recreation Grounds' is as under :—

Poole Park	..	..	42 acres
Ladies' Walking Field	..	..	9 „
Longfleet	..	..	1 „
Parkstone Park	..	..	3 „
Alexandra Park	..	..	$6\frac{3}{4}$ „
Sandbanks	..	..	$12\frac{1}{4}$ „
Compton Acres	..	..	2 „
York Estate	..	..	$\frac{3}{4}$ „
Branksome Park	..	..	$31\frac{1}{2}$ „
Canford Cliffs	..	..	$12\frac{3}{4}$ „
Constitution Hill	..	..	7 „
Lilliput	..	..	$3\frac{1}{2}$ „
			<hr/>
			$131\frac{1}{2}$ acres

VITAL STATISTICS.

The Birth Rate for the year 1922 was 19·5 per 1,000 of the population, and is falling yearly. For the country as a whole the rate was 20·6.

Thirty years ago, Poole had a birth rate of over 30 per 1,000 inhabitants. This gradual reduction of the birth rate is not a local matter, but a national question of the greatest importance.

The Infantile Death Rate has risen from 73·6 per 1,000 births to 79·7. This is discussed in the section of the Report dealing with Infant Welfare.

The Marriage Rate shows again a slight decrease, from 16·7 per 1,000 of the population to 16·3. After the higher figures of the post-war period, the rate is gradually reverting to a pre-war standard.

The Death Rate. The General Death Rate for the year was 14·1, as compared with 11·9 in 1921. That for England and Wales as a whole was 12·9 and 12·1 respectively.

Any method of arguing the general health of a district from the death rate, however, requires more than a simple comparison of the figures for one town with another. What is called the age and sex distribution of the population must be taken into account. A busy manufacturing centre, for instance, will have a larger proportion of younger adult life amongst its inhabitants, than an essentially residential district like Poole. This factor tends to result in a low death rate in the former instance.

Of all deaths both in 1921 and in 1922 in Poole, over 40 per cent. were of the age of 65 years or more. In a commercial town, inhabitants who reach this age are about 10 per cent. fewer. Poole therefore gives a relatively greater expectation of prolonged life.

The Zymotic Death Rate has risen from ·36 to ·49, the Cancer Death rate from 1·2 to 1·4, and the Pulmonary Tuberculosis Death Rate from ·96 to 1·3 per 1,000 of the population.

EMPLOYMENT.

The chief industries and occupations of the inhabitants are connected with the manufacture of pottery and tiles, the Gas Works, Engineering and Timber Yards, and Fishing

Unskilled labour—quayside and general—forms a larger percentage than is desirable.

In the eastern end of the Borough many of the residents find employment in the adjacent County Borough of Bournemouth.

UNEMPLOYMENT AND POOR RELIEF.

The year began with a larger unemployment figure for January than in 23 months of the two previous years. The summer and autumn months, however, showed a distinct improvement, the average from June to October being 527, compared with 522 in 1920, and 1365 in 1921.

			1921	1922
January	..	..	853	1637
February	..	..	903	1560
March	..	..	951	1304
April	..	..	905	1139
May	..	..	1229	920
June	..	..	1563	647
July	..	..	1771	551
August	..	..	1365	488
September	..	..	1151	459
October	..	..	979	540
November	..	..	1079	738
December	..	..	1402	969

The Board of Guardians were at the end of 1922 affording relief in some form or other to 1,443 individuals—an increase of 57.

WATER SUPPLY.

A public water supply should be, by statute, "pure and wholesome." But the grading of a pure and wholesome water is a matter of considerable difficulty. A recent definition by Sir Alexander Houston is water in "such a condition that it cannot cause Typhoid Fever, Cholera or other water-borne disease. It must also be free from chemical poisons and have no injurious effect on metals. Further, it should be bright, clear and sparkling, free from suspended matter, reasonably soft, and the salts in solution should not be in excessive amount."

The water supply provided from the Corfe Mullen Mains meets this definition satisfactorily with the exception of the standard of softness.

The facts that economically concern the public with regard to a hard water are : Is it wasteful in soap ? Does it by caking on a large scale, e.g., in factory boilers, lead to avoidable expense ? In the interests of existing trades, is a hard or a soft water more desirable ? Does the hard water cause digestive upset ? Does it tend to form "stone" ? Does it cause warts and "chaps" ? Does a soft water tend to induce rickets ?

While some everyday conceptions on these matters may be scientifically refuted, it still remains undesirable to maintain either an extremely hard or a very soft water. The Borough supply

at present fluctuates about the maximum point of hardness which is considered tolerable as a standard for general use.

In order to safeguard the supply against a very dry season, additional pumping plant is being installed.

The system of purification by chlorination provides the Town with water of a high Bacteriological standard of purity, the samples of well and tap water being periodically submitted to examination in the Borough Laboratory.

A portion of the east end of the Borough is supplied from the reservoirs of the Bournemouth Corporation.

The total amount of water consumed in 1922 was 354,255,000 gallons, giving a daily consumption of 22 gallons per individual, an increase of $1\frac{1}{2}$ gallons per head per day on 1921.

DRAINAGE AND SEWERAGE.

Definite progress can be reported for the year in the replacement of domestic cesspools by the sewerage system.

The Sandbanks district, a portion of the parish of Hamworthy, a group of twelve roads between Churchill and Albert Roads in the Branksome District, and a short road at the Bourne Valley end of the Borough are all under process of change to the modern system.

This will have the effect of reducing the total number of cesspools to be dealt with by 176.

That total has, however, automatically increased during the year—through building developments—chiefly on the periphery of the town and outside the sewered areas, by 67, there being in all 379 in use in 1922, as against 312 in the previous year.

From these a total of 1,062,000 gallons of material has been collected and removed, together with the contents of 9,464 pails.

Motor traction, and petrol in place of manual pumping, were adopted in April. Details of the year's work are to be found in Table E.

CLEANSING AND SCAVENGING.

These services are carried out by the Borough Surveyor's Department, acting under the direction of the Health Committee.

The equipment includes 13 horsed vehicles for House and Trade Refuse collection and 7 for the watering of streets, flushing of mains, etc.

The question of steam, petrol and electric motor power in

comparison with a horse service for house-to-house collection and for transport to tips has been considered in detail during the year.

Motor power is being introduced, in the first instance, to deal with the Branksome Park and Canford Cliffs District, where the distance from house to house in collection and removal is such as to afford an opportunity for this method to show an economy on horse haulage.

Three tipping grounds are in use—at Baiter, Whitecliff, and Bourne Valley. The tipping of organic refuse within the confines of a large community is undesirable from all aspects. It is uneconomical. It is bad "Public Health." Fires, fumes, flies, fungi and four-footed fomites are the legacy.

It is to be hoped that a few years will see a high temperature method of incineration by Destructor in use, driving its own screening and clinker-crushing plant, turning out paving slabs for the streets, producing a useful fertiliser and otherwise bringing into harness for the Town's benefit a source of energy which at present evinces itself as an irritating nuisance.

The economy of haulage by modern motor power permits of a Destructor being further from the centres of daily activity of a community. An extra mile to run is a negligible expense compared with the resulting general convenience.

The use of a standard type of metal bin with effective lid for the temporary storage of house and shop refuse should be made obligatory.

While deaths attributable to fly-borne disease have been greatly reduced—from 10 in 1921 to 3 in 1922—the warm summer months have always to be considered a potential danger to the young, if flies are allowed to abound, carrying the germs of Summer Diarrhoea into the food and drink of the household.

But a still more crying need is that the fields of fly-breeding refuse still found necessary as tipping-grounds should be dispensed with at the earliest practicable moment.

Lime-washing is of valuable assistance in maintaining the cleanliness of courts, enclosed back-yards and alleys. This is carried out by the Health Department twice yearly.

Opportunity is also taken during the School Vacations to disinfect all Elementary School buildings of the Borough.

HOUSING.

The Census of 1921 determined the population of the Borough to be 43,661 at June of that year. By an approved method of calculation (Logarithmic) the estimated population on this basis at mid-year, 1922, is 44,168. The Registrar-General, however, considers this to be an overestimate, and for purposes of statistics credits Poole with a total of 43,250 inhabitants.

This, it is considered, is unduly low. Were Poole a "summer resort" the figure might be reconciled. But Poole is much more an all-the-year-round Health Resort. In other words, a short holiday influx of visitors is not characteristic of the district. It is not a "tripper" centre.

Of the 145 new houses completed during the year, it is estimated that about one hundred are now occupied by residents new to the Town. This means approximately an influx of about 500 inhabitants, which agrees with the theoretically calculated increase, without consideration of "natural increase." It also means, however, that little has still been effected towards the housing shortage for the congested districts. 26 houses of the Waller type were still under construction at the end of the year, while 34 had been completed and occupied.

About 50 houses of artisan type should develop during the year as part of the Corporation's activities, at Ballard Road, Green Road, Skinner Street and Gray's Yard.

Speculative building is appreciably on the increase, noticeably in the Lake Road District of Hamworthy, at Stanley Green, and at Hamworthy Junction.

Of the 8,245 houses, approximately half have fitted baths.

Under Section 17 of the Housing Acts of 1909, inspection of premises was made on 958 occasions. Particulars of the Health Department's activities in maintaining a satisfactory standard of housing conditions, recording also the work of the Sanitary Inspectors in this connection, are to be found in Tables F and G.

Under the difficult conditions existing, considerable lenience has been shown where in more normal times a stricter standard would be justified. On the whole, the remedying of imperfect conditions has been carried out when called for with a commendable absence of conflict. Legal proceedings have not been found necessary throughout the year.

Visits carried out by the Health Visitors in the more congested

districts often bring to light unhealthy or defective conditions, which, from their reports, can be investigated and rectified. Altogether 11,283 visits were made.

Under the Rent Restriction Acts of 1920, 26 applications by tenants were investigated and, where necessary, the defects have been remedied.

HOUSES LET IN LODGINGS.

There are eight such houses, chiefly of the older type of spacious family residence, sub-divided into lets of one to three rooms. The sanitary arrangements and provision of water supply in most leave much to be desired. In some cases the topmost tenants require to bring their water from the yard, this temporary supply being stored in the combined living and sleeping room.

34 visits of inspection were made to these houses.

SANITARY INSPECTION.

Particulars of visits of inspection and of defects and nuisances found in the course of these visits are to be found in Tables G and H.

Informal notices of insanitary conditions were issued in 232 instances. Statutory notices, on failure to remedy the conditions were served on 10 occasions, in all of which the owners carried out the obligation.

SMOKE ABATEMENT.

The system of observation of factory premises introduced last year has been continued. The object is to keep under control the amount of dense smoke emitted from factory chimneys, and to maintain a clear atmosphere. Excess of smoke distributed in the air of the Borough means liability to fog—as fog is commonly due to particles of soot and other suspended matter collecting a coat of moisture and settling in a dense mass.

PUBLIC BATHS.

Fresh Water. These are situated close to the Guildhall and consist of 5 cubicles with lavatory accommodation.

During the year, 6,448 persons have made use of the Baths, compared with 6,206 in 1921. The figures for the current year include children of elementary schools, for whom special facilities were provided at a nominal sum, and who provided 953 of the total number.

Salt Water. There is a free open-air tidal Swimming Bath on the foreshore at Baiter, of which full advantage is taken during the summer months.

This swimming bath, however, only caters for a small section of the community. It should seriously be considered whether the time is not now ripe for proceeding with an old-standing scheme of a comprehensive nature for the provision of a well-equipped and up-to-date set of salt water swimming and plunge baths not subject to seasonal closure.

DESTRUCTION OF RATS.

During 1922, 92 visits were made for the purpose of laying poison for rat destruction.

Of these, 49 visits were made to the Borough Refuse Tips, and 43 to private and business premises and open ground, 34,140 baits in all being laid.

While it is difficult to ascertain with any degree of accuracy the number of rats destroyed, yet 2259 dead rats have been discovered, and in practically all the premises treated, those concerned have expressed their satisfaction to the Department.

MOSQUITOES.

During 1922 the system of spraying the fresh water lakes, water courses, &c., with paraffin was continued within the Borough.

From May to September, the fresh water lake in Poole Park was sprayed on 15 occasions, the watercourse at the Golf Links, Lilliput, 10 times, and the lakes at Branksome Chine on 6 occasions. A total of 62 gallons of paraffin was used at these three places and 31 visits made.

During the year no complaints have been received of nuisance caused by the presence of the insect.

FOOD CONTROL.

In addition to the ordinary inspection of Foodstuffs and meat, certain important Regulations lay down lines of action which the Inspectors of the Department follow in safeguarding the public in matters concerning the upkeep of Dairies, Cowsheds and Milk Shops, the Sale of Milk and Cream and the sale of Food and Drugs.

The quantities of unsound food which it has been necessary to condemn and destroy are shown in Table I.

110 samples of milk and 4 of cream were examined for presence

of inadmissible preservatives. No preservative was found in any of these.

240 samples of milk were analysed as to their average composition. Judged by this standard the quality of the milk supplied to the Community is better than in any year since 1914.

	<i>Fat.</i>	<i>Solids other than Fat.</i>
1914	3·47	8·80
1915	3·46	8·73
1916	3·65	8·76
1917	3·35	8·72
1918	3·30	8·76
1919	3·48	8·65
1920	3·46	8·49
1921	3·58	8·74
1922	3·74	9·00

With a view to detecting Tuberculous infection in milk supplies, and to identify the source of the taint, the Borough Laboratory examines periodically samples collected by the Sanitary Inspectors.

Under the Sale of Food and Drugs Act the samples enumerated in Table J were subjected to analysis as to genuineness.

18 cases of adulteration of milk, and two of mustard were detected. In all cases the vendors were cautioned.

A report by the Borough Analysts on their work for the year is given below :—

Report on Work as Public Analysts for 1922.

“ During the year 1922, 164 samples were submitted by the Inspectors under the above Acts, of which 11 were returned as adulterated, giving a percentage of adulteration of 6·7.

There was no point of exceptional interest among the characters of the samples returned as adulterated except that three samples of milk, containing 35, 31 and 35 parts of dirt per million, figure among them. The varieties of dirt found in milk : particles of dung (sometimes fresh, sometimes mouldy), fodder, earth and rust ; and cow-hairs are mostly heavier than milk and settle quickly. When the portion of milk dipped out contains dirt in amounts of the above order, the bottom of the can will probably show very obvious deposit, seeing which the dairyman ought to realise the need for greater cleanliness. For his own sake the exclusion of dirt is important. Not only does its presence hazard custom, but these particles, being heavily loaded with bacteria capable

of souring milk, shorten the period before souring appears—we frequently find a dirty milk souring in a day while cleaner milks under the same conditions are keeping fresh four or more days. In the cases of ten other samples of milk where dirt averaged 21·6 parts per million the samples were returned as genuine with observations. That 11·8 per cent. of milk samples contain notable amounts of dirt shows there to be room for improvement.

None of the twelve samples of butter analysed was of the old-fashioned dry type ; three were fairly dry, with water between 13·7 and 13·8 per cent., the other nine contained between 15·2 and 16·0 per cent. of water—as much as permitted. Butter is sold wetter every year and the 1922 average of 15·53 is above that for 1919, 1920 and 1921, when butters contained on an average 15·44 per cent. of water. But whereas in those years nine out of eleven samples contained boron preservative (in an average amount of 0·226 per cent.) of the 1922 samples half contained no preservative and the average boric acid in the other half was lower (0·166 per cent.).

Margarine similarly increases in water-content : 15·18 per cent. average for 1922, against 14·43 per cent. for three previous years. With this article boron preservatives are always present and in increasing amounts : an average of 0·258 for 1922, against 0·222 per cent. for the three preceding years.

A sample of Stilton cheese, submitted because of its “ burning taste,” contained 1·94 per cent. of lactic acid. Such an amount of acid would not be out of the way for some foreign varieties of cheese, but Stilton generally has less than two-thirds this amount.

A sample of shredded beef suet was received which contained 14 per cent. of ground rice (an addition that was declared on the carton). This sample contained 1·96 per cent. of moisture against about the 14 per cent. commonly found in ordinary beef suet.

The samples of ice-cream contained minute amounts of zinc, namely, 0·012 and 0·023 grains per pound respectively. This metal is derived from the galvanised freezers, and amounts of this order are the rule. Use of new galvanised ware or prolonged keeping in galvanised vessels would increase the amounts and for this reason the metal is invariably estimated.

In three samples of sausage, the boric acid never exceeded reasonable quantity ; they contained 18, 11 and 21 grains per pound respectively.

(Signed) *WILLIAM PARTRIDGE*,
Joint Public Analyst.

DISEASES OF ANIMALS ACTS.

Swine Fever. During the year 26 suspected cases were reported to the Ministry as against eight cases in 1921.

Parasitic Mange. One case only occurred during the year, as against three cases last year.

No other scheduled diseases have occurred during the year.

A new Regulation of Movement of Swine Order of 1922 came into operation on October 1st, 1922. This Order greatly facilitates the movement of swine all over England, and imposes Licences on movement of pigs from Markets or Dealers. The work of granting Licences is therefore increased. It has been necessary to give several cautions regarding Licences, and in two cases, successful prosecutions were instituted during the year.

SLAUGHTERHOUSES.

There is no public slaughterhouse in the Borough. 517 visits of inspection have been paid to the 12 licensed and 2 registered slaughterhouses. There has been no occasion for official action in connection with the conditions of operation of these killing centres during the year, but an up-to-date public abattoir is highly desirable.

CEMETERIES.

The question of extension of the three cemeteries in the Borough, in Poole, Lower Parkstone and Branksome, to meet future demands has been under consideration. The extensions proposed extend to $14\frac{3}{4}$ acres, which will, under ordinary conditions, meet the requirements of the population for an additional 10 years.

INFECTIOUS DISEASES.

Baiter Peninsula Isolation Hospital has not been utilised during the year.

To Alderney Isolation Hospital 129 cases have been admitted. Of these 21 were from the Poole Rural District, 3 from Wimborne Urban District, and 15 from the Military Stations in the County, which are served by the Borough Hospital.

In 1921, 204 cases in all were dealt with.

Scarlet Fever. 64 cases were admitted from all sources, a reduction of 40. No deaths occurred. One case admitted for this disease was kept under isolated observation and found to be a condition other than Scarlet Fever.

Diphtheria. 47 cases were admitted, a reduction of 31. Twelve of these were not cases of active disease, but required isolation

and treatment as "carriers," or positive contacts, and three others were found after admission to be conditions other than Diphtheria.

Two deaths occurred. Both cases were admitted *in extremis*, and died within 24 hours of admission.

The systematic swabbing of "sore throats" which present themselves at the School Clinics is a valuable aid in checking an outbreak amongst the Schools, as often an unsuspected case is thus disclosed and spread prevented.

Measles. Five cases of Measles in young children, all with complications, were admitted, of whom two succumbed to a supervening Pneumonia. These cases were treated under the Child Welfare Scheme of the Borough.

Ophthalmia Neonatorum. Two cases were treated under the Child Welfare Scheme, and were discharged with sight unimpaired.

Puerperal Fever. Three cases were admitted, of whom one was discharged cured, one died, and the third was re-transferred to the Cornelia Hospital.

Encephalitis Lethargica. This one case was of the "Oculo-Motor" type, in a youth of 18. Binocular vision was lost, and the patient had to be re-educated to the normal use of his eyes.

Other Diseases. These consisted of Erysipelas, Mumps and Scabies.

<i>Attack Rate.</i>	1920	1921	1922
Scarlet Fever	1·61	2·04	·91
Diphtheria	2·89	1·78	·77
Typhoid	·11	·07	—

Tables K and L give details in tabular form of case incidence of all infectious diseases.

Extension of Scope. For the treatment of ordinary Notifiable Infectious Diseases, the Borough Hospital now embraces the following areas :—

Poole Borough—population, Census 1921	43,661
Poole Rural District—population, Census, 1921	7,378
Wimborne Urban District ,, ,,	3,742
Wimborne & Cranborne Rural Dist. ,,	15,104
	<hr/>
	69,885
	<hr/>

This is not inclusive of Army Units.

For the treatment of Small Pox, the area covered by Baiter Hospital for emergency purposes includes :—

Poole Borough & Rural Dist.	51,039
Wimborne & Cranborne Rural District	15,104
Dorchester Borough	9,554
	<hr/>
	75,697

Training for Fever Nurses' Certificate. Training has been continued throughout the year. Four Probationer Nurses entered for and passed the First Examination for the Certificate. One Junior and four Senior Probationers are now being prepared for their respective tests in April, 1923.

Disinfection. In addition to the ordinary routine work for the Hospital, the Disinfection Station has carried out the following work for outside agencies in the direction of controlling the spread of infection :—

Beds, feather or flock	..	..	24
Blankets	..	..	243
Bolsters	..	..	34
Carpets	..	..	1
Coats	..	..	1
Counterpanes	..	..	22
Cushions	..	..	14
Dresses	..	..	13
Dressing Gowns	..	..	2
Eiderdowns	..	..	15
Jackets	..	..	5
Mats	..	..	2
Mattresses	..	..	78
Pillows	..	..	153
Rugs	..	..	1
Scarves	..	..	2
Shawls	..	..	6
Sheets	..	..	53
Stockings and Socks	..	..	5
Towels	..	..	4
Trousers	..	..	1
Underclothing	..	..	9
Vest	..	..	1
Waistcoat	..	..	1
Other Articles	..	..	57
			<hr/>
Total			747

Ambulance. The horsed ambulance vehicles have during the year been replaced by an up-to-date motor ambulance.

**COST OF UPKEEP—ALDERNEY HOSPITAL AND
DISINFECTION AND DISINFESTATION STATION.**

Salaries	£900 8 2
Maintenance	694 8 0
Fuel, Light, Water and Cleaning ..	288 9 8
Drugs and Medicines	83 5 9
Interest & Sinking Fund	295 10 0
Miscellaneous	147 17 5
	<hr/>
	£2399 19 0

Average cost per patient per week, £2 19s. 0d.

TUBERCULOSIS.

The Dorset County Council is the local Authority for the prevention and treatment of Tuberculosis.

In the Borough during the year 1922, there were 33 notifications of Pulmonary Tuberculosis in male inhabitants and 34 in females. In addition, three cases previously notified elsewhere became resident in the Town. (2 male, 1 female).

Of the above 67 Borough cases, 5 male and 7 female notifications were of elementary school age, and the total compares with 100 in the previous year.

Of other forms of the disease there were 9 notifications, of whom 6 were of school age, viz:—

Tuberculous Cervical Glands ..	5
Tuberculous Abdominal Glands	1
Cervical and Abdominal Glands	1
Spinal Caries	1
Meningitis	1

In addition, one previously notified case of Tubercular Epididymitis became resident in the Town.

In 1921 there were 8 notifications of non-pulmonary forms.

Analysing the deaths occurring during the year, 51 deaths were ascribed to Pulmonary Tuberculosis and 6 to other forms of the disease. The corresponding figures for 1921 were 42 and 6 respectively.

Of the 51 deaths from the Pulmonary form, 26 had not been previously notified,

7 were notified during 1922
 8 „ „ in 1921
 5 „ „ „ 1920
 3 „ „ „ 1919
 1 was „ „ 1918
 1 „ „ „ 1916

This represents a distinct falling off from previous years, as seen below :—

	Died in	1917	1918	1919	1920	1921	1922
Previously notified.		19	18	25	20	31	25
Not notified.		31	28	16	19	11	26
		50	46	41	39	42	51

*Notification of Pulmonary Tuberculosis became compulsory in 1912, yet in 1922 less than 50 per cent have been brought officially to notice prior to death.

VENEREAL DISEASES.

Administration and treatment is in the hands of the County Council. A Clinic in the Borough itself is very necessary. At present the nearest available Centre is at the Royal Victoria Hospital, Boscombe.

Two cases (sea-faring) which presented themselves voluntarily to the Medical Officer of Health for advice, were referred thither for treatment.

The number of patients who attended the Clinic registered as resident in the Borough of Poole was 60.

Particulars are given below.

Sex.	Syphilis.			Gonorrhoea.			Diag- nosed as Non- Vene- real.
	Treat- ment complet- ed.	Ceased Attend- ance before comple- tion of treatment.	Still under treat- ment.	Treat- ment complet- ed.	Ceased Attend- ance before comple- tion of treatment.	Still under treat- ment.	
M.	5	3	11	7	1	4	13
F.	1	1	4	—	—	—	10
	6	4	15	7	1	4	23

Total—60.

Scrutiny of the Register of Deaths shows that during the year 27 deaths can be attributed directly or indirectly to an infection with Venereal Disease.

OPHTHALMIA NEONATORUM.

This crippling and avoidable disease of infancy has shown a welcome diminution from 21 cases in 1921, with 2 deaths and a partial loss of sight in a third case, to 9 cases in 1922, in all of which cases full sight has been preserved.

BOROUGH LABORATORY.

The sphere of gratuitous utility of the Public Health Laboratory includes the Hospitals in the Borough, the Medical Practitioners of the Borough, the School Medical Service, the Maternity and Child Welfare Service and the Food Inspectors.

For reports on material coming from outside the Borough small charges are made.

Charges are also made for special work, such as preparation of vaccines, bacteriological tests of water samples, &c.

The work of the year is shown in the Table below :—

Nose, Throat and Ear Swabs for Diphtheria :

Hospital	430	
School Clinics	294	
Medical Practitioners	261	
County Specimens	5	
	<hr/>	990

Sputa : 73

Hairs for Ringworm :

School Clinics	103	
County Specimens	5	
	<hr/>	108

Bacteriological Examinations of Water 16

Cerebro-spinal Fluids 3

Other Pathological Fluids 11

Pathological Tissues 19

Blood Films 2

Blood for Detection of Typhoid-Dysentery group :

Borough	2	
County	2	
	<hr/>	4

Urines : .. .. .	..	..	..	..	..	28
Examination of Milk (County) ..	..	..	..	..	..	6
Examination of Dejecta ..	..	..	..	..	..	4
Venereal Diseases ..	..	..	..	..	..	27
Preparation of Vaccines ..	..	..	..	..	..	6
Total	..	..	..	..	..	<u>1296</u>

Hospitals, Medical Services and Nursing arrangements available for the Borough.

1.—Hospitals and Sanatoria.				
Classification	Name	Situation	Accommodation	Provided by.
Tuberculosis	Various	Various	72 for County	County Council
Maternity	Cornelia Hospital	Longfleet	4 beds	Borough Council
Children under 5	Cornelia Hospital	Longfleet	8 cots	Borough Council
Infectious Diseases	Borough Isolation	Upper Parkstone	73 beds and cots	Borough Council
Small Pox, etc.	Baiter Isolation	Poole	20 beds	Borough Council
Children's Convalescent	Swanage Cottage	Swanage	3 for Borough	Royal Red Cross Soc.
Venereal Disease	Royal Victoria	Boscombe	4 beds	County Council
General	Cornelia Hospital	Longfleet	60 beds	Voluntary effort

2.—Clinics and Treatment Centres.

Classification	Situation	Provided by.
Tuberculosis	King Street, Poole	County Council
Maternity & Child Welfare	Council Buildings, Poole	Borough Council
„ „	Branksome Council Buildings	Borough Council
Maternity & Child Welfare Association, Consultation Centre and School for Mothers	Poole	Voluntary effort subsidised by Borough Council
„ „	Branksome	„ „
„ „	Heatherlands	„ „
„ „	Newtown	„ „
„ „	Longfleet	„ „
Elementary Schools, Minor Ailments	Council Buildings, Poole	Borough Council
„ „	Council Buildings, Branksome	Borough Council
„ Dental Operative Clinic	Council Buildings, Poole	Borough Council
„ Nose and Throat Operative Clinic	Cornelia Hospital	Borough Council
„ Eye Clinic	Cornelia Hospital	Borough Council
„ X-Ray Clinic	Cornelia Hospital	Borough Council
Venereal Diseases	Boscombe	County Council
General Dispensary	Langley Road, Branksome	Voluntary effort

(3). Professional Nursing in the Home.

General. One District Nurse, for the Parkstone District, is provided by the Parkstone District Nursing Association. One District Nurse, for work in the Poole, Longfleet and Oakdale Districts, provided by the Poole District Nursing Association, is available in the winter months. More nurses are urgently required. These Associations are affiliated to the Dorset County Nursing Association.

Maternity. Seven Certified Midwives are at present practising in the Borough.

One District Nurse is provided by the Poole District Nursing Association for Maternity work.

(4). Ambulance facilities.

(a) *Infectious Diseases.* A motor ambulance for one stretcher and one sitting case is stationed at the Borough Hospital.

The area covered by this vehicle embraces a considerable portion of the East of the County of Dorset.

(b). *Non-infectious and Accident Cases.* There is no ambulance service for General Hospital purposes. A vehicle in private possession in the Borough has given valuable help on necessity.

(5). Other Institutional Provision.

Unmarried Mothers. A Home for girls awaiting confinement, and for unmarried mothers with their infants, with four beds and four cots, is situated at "Oak Tree Lodge," Lower Parkstone. This is supported by voluntary effort.

Illegitimate Infants. The Home at "Parkmoor," Bournemouth Road, has now been transferred to a larger house in Commercial Road, capable of boarding 20 infants. It receives an annual grant from Government Funds, and is subject to supervision by the Medical Officer of Health.

Homeless Children. The Dorset Home, in West Street, Poole, with accommodation for 75 girls, is a recognised Industrial School under the Children's Act, 1908. A few local children are at present in the Home, but the majority come from the London County Council area. Girls are retained till the age of 18. The majority ultimately go into domestic service.

St. Faith's Home, Constitution Hill, a Home for 18 girls, affiliated with the Waifs and Strays Society, has closed during the year.

HEALTH WEEK, OCTOBER, 1922.

The activities of the Health Department during Health Week may be best summarised by reproducing the following report extracted from the local Press, who are always ready to champion any endeavour to raise the standard of the Public Health of the Borough.

HEALTH WEEK.

In the Borough of Poole.

"Self Help in Health."

"What is meant by 'Health Week'? Every day and every week the question of Health and ill-health is before us—it is not the privilege of any one week in the year to be free from concern in this respect.

But for one week in the year the community of the Borough—men, women and children—are asked to give a little more serious thought to the question of their personal health, not because any one of them is ill, but because SAFETY FIRST applies to health as it does in other walks of life—and by following the rules of the road—the simple rules of public and individual health, many a bodily incapacity can be avoided.

This year the motto adopted is "Self Help in Health," and "How to Help Oneself to Health" has been the text of the teaching of the Medical Officer of Health (Dr. R. J. Maule Horne)—to father, to mother and to child.

Supported by the Mayor (Councillor J. C. W. Julyan) as Chairman of the Health Committee, and by an Executive Committee drawn from all branches of activity in the Borough, Dr. Horne has directed his lines of action in four directions:—

- (1). The general public, through the religious and lay bodies and institutions of the Borough.
- (2). The adult worker at his work.
- (3). The mother with her infant.
- (4). The child at School.

On Sunday, October 8th, the propaganda began. Apart from references made in the churches, the Mayor, in his capacity as Chairman of the Health Committee, and the Medical Officer of Health were both on the platform, morning and evening, driving home the importance and at the same time the simplicity of the ordinary rules of health, which can secure to most a freedom from the hundred and one incapacitating ailments which can be more or less directly attributed to the neglect of these rules,

Making the subject of " Oral Sepsis," or " Poisoning of the Body through the Mouth " the theme for the week, Dr. Horne has driven home his point to the father, mother and child alike. Bearing in mind that good advice can stand repeating, he has not hesitated to add candour and bluntness as he went on, to leave no room for misunderstanding.

The very real thanks of the Borough are due to the enlightened and enthusiastic support given by employers of labour, which has enabled talks to be given to the employees in their working surroundings, at Messrs. Carter's Hamworthy Potteries, the Gasworks, Poole, the Bourne Valley Potteries, and the South Western Potteries. By this means probably a thousand fathers have been put in reach of advice which, if too late to be applied to themselves, they can at least bear in mind when their children's health is at stake.

The willing co-operation of the proprietors of cinemas was welcomed, thanks being due to Messrs. Bravery, Lewis, Holder and White for facility to display on the screen some telling points.

For the special organisation of that branch of Health Week which may be described as " Baby Week," the Borough has ready to hand a body of workers whose energies have covered fifteen years of useful voluntary service to the mothers and infants. To this body—the Borough of Poole Maternity and Child Welfare Association—was allotted the work of spreading the gospel of keeping the healthy baby well. The lady voluntary managers of the Centres, with their assistants, spared no trouble to draw thither the general body of mothers to see for themselves the nature of advice and instruction which is at their service at all times. Many young mothers have given written testimony to the advantage which has resulted both to themselves and to their infants from their association with the doctors, dentists, skilled nurses and other enthusiastic workers—each expert in some branch of domestic utility—who form the staff.

During the week, these Centres had their doors thrown wide open, on Monday at the Old School House, Sea View Road, on Tuesday at the Skinner Street School, on Wednesday at the Guardians' Board Room, Longfleet, on Thursday at the Church Army Hall, Heatherlands, and on Friday at the Conservative Club, Ashley Road. At each one the Medical Officer of Health passed on to the mothers the same advice and warning as he had given to the fathers—of the real meaning and dangers of " Oral Sepsis "—so

that they might bring the advice to bear on their children, whether at school or in the cot.

Speaking of the saving of infant life, "Why," he said, "should we not have a 'Health League?' " Putting before them an imaginary "Hants & Dorset Health League," he was able to show the mothers graphically how Poole stands in the fight for health, the figures showing the numbers of infants which die in one year out of each thousand born:—

"Hants. & Dorset Infantile Health League, Season 1921."

1	Southampton (3)	62·4
2	Poole (2)	73·6
3	Bournemouth (1)	75·1

(Figures in brackets represent the relative positions in the previous season).

Who form the teams in this Health League? Every man, woman and child in these Boroughs.

The Medical Officer of Health, the Doctors, the Nurses, form the referees and their assistants. But the umpires cannot win the match or top the League. It requires the team to do that; and the more tender and frail the members of the team, the more anxious are these umpires and trainers to keep them fit for a place, to supervise the training, to teach the rules of the game, and if necessary, to ensure that the rules are not broken.

Still keeping the pitfalls of "Oral Sepsis" in front of his hearers, he pointed out how every year millions of weeks' wages are lost to workers' through their having to "go sick" from headache, dyspepsia, gastritis, anæmia, debility, and so on, all handicaps which in the very great majority of cases can be traced to imperfect care of the mouth and throat.

In the realm of the growing child, Dr. Horne has made a circuit of each Elementary School in the Borough, giving a common-sense talk to boys and girls of the upper standards, putting before them, as before their elders elsewhere, the extreme importance to their future health—their efficiency in recreation as well as in work—of proper attention to the hygiene of the mouth.

To still further emphasise his point, it was arranged that amongst these children competitive essays should be undertaken. All schools have taken up this competition with zest. The best essays from both boys' and girls' departments of each School are being submitted to a critic well-qualified to judge, and the results will be announced in a later issue.

It needs no pressing argument to see that, taken in this way, in a homely practical appeal to fathers, mothers and children alike on one special subject so familiar to all, yet so imperfectly understood, the endeavours of our workers in health cannot fail to redound to the benefit and the general welfare of our people."

**ROYAL SANITARY INSTITUTE CONGRESS.
BOURNEMOUTH, 1922.**

**REPORT OF PROCEEDINGS BY COUNCILLOR J. C. W. JULYAN,
Chairman of Health Committee.**

"I have pleasure in submitting a short report of the above, which I attended with Councillor Miss Briggs and the Medical Officer of Health, as your delegates.

The papers read covered a large number of subjects dealing with matters of great interest to all progressive Authorities. The Presidential address of the Rt. Hon. Major General J. E. B. Seely proved beyond a doubt that our efforts towards a fuller knowledge of the laws of health must not be relaxed, one of his chief points being "that the health policy of the nation should not be merely the prevention of disease and premature death, but the increase in human capacity and happiness of the people—a stronger race, a keener intellect." Lastly, "it is by the education of the people in hygiene that reform is to be secured." This latter point was strongly emphasised by the Lord Mayor of London, Sir A. News-holme and Sir George Newman in addresses to the Congress in their respective sections.

No meetings created more interest than that dealing with Maternity and Child Welfare work in all its aspects. The paper submitted by our Medical Officer, Dr. Horne, "A Loophole in the Midwives Act," was well received, and much practical good will, in my opinion, result from the resolution that was passed arising out of the discussion. Space forbids my mentioning a tithe of the subjects dealt with, but a paper on "The Conservation of our National Water Supplies" helped all who heard it to realise the importance of this important matter.

I should also like to mention the success obtained by Messrs. Carter & Co., Encaustic Tile Works; Sharp Jones & Co. (2) and Jennings & Sons (2) for their respective exhibits in the exhibition of Sanitary Appliances, etc., all being awarded premier honours.

The value of these meetings to those attending and through

them the Community at large, can be realised by the numbers present. At this Conference over 900 attended from all parts of the world—528 of whom represented Government Departments, Dominion and Foreign Governments, and Municipal Authorities in the Kingdom.

The reception held in the Poole Park was very largely attended, and warm appreciation of the amenities of our Park was expressed by many present.

In conclusion, I should like to thank the Council for the privilege of attending, and feel confident that much useful information is obtained by those who are sent as representatives on behalf of their respective Authorities.

JOSEPH C. JULYAN,
Chairman, Health Committee."

LIST OF TABLES.

TABLE	A.	Vital Statistics, quinquennial.
„	B.	Deaths from all causes.
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„	D.	Births.
„	E.	Cesspools.
„	F.	Housing.
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„	H.	Sanitary Inspection
„	I.	Unsound food.
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„	K.	Cases admitted to Borough Isolation Hospital.
„	L.	Infectious Diseases.

TABLE A.

Vital Statistics, Quinquennial.

Year	Mid-year population	Infantile mortality per 1000 Births	Per 1000 of Population.					Pulmon- ary Tuber- culosis Death Rate
			Birth Rate	Marriage Rate	Death Rate	Zymotic Death Rate	Cancer Death Rate	
1885	12957	86	39·5		18·7	0·8		·9
1890	14027	82	26·9		14·6	0·9		1·3
1895	17050	126	29·5		15·1	0·4		1·1
1900	18991	131	27·7		15·3	0·6		·8
1905	21804	113	26·7		15·7	0·9		·9
1910	34168*	82	26·0	15·4	12·7	0·9	1·1	·96
1915	42800	93	18·7	18·6	13·2	0·6	·9	1·3
1920	43400	75	23·6	22·0	10·8	0·3	1·2	1·4
1921	43661	73·6	21·8	16·7	11·9	0·36	1·2	
1922	44168	79·7	19·5	16·3	14·1	0·49	1·4	
England and Wales, 1922		77	20·6		12·9			

* Borough Enlarged.

TABLE B.

DEATHS.

TOTAL DEATHS Registered in the Borough, 608. Rate 13.7.

TRANSFERABLE DEATHS :—(a) of Non-Residents Registered in the Borough : 27.

(b) of Residents not Registered in the Borough : 42.

NETT DEATHS belonging to the Borough 623. Rate 14.1.

CAUSES OF, AND AGES AT DEATH DURING THE YEAR 1922.

Causes of Death	All Ages	Under 1 yr.	1 and under 2 yrs.	2 and under 5 yrs.	5 and under 15 yrs.	15 and under 25 yrs.	25 and under 45 yrs.	45 and under 65 yrs.	65 and over	Total deaths in Institutions
All causes : certified uncertified.	618 5	66 3	16 —	16 —	12 —	35 —	75 —	147 1	251 1	122 —
1. Enteric Fever	—	—	—	—	—	—	—	—	—	—
2. Small pox	—	—	—	—	—	—	—	—	—	—
3. Measles	7	3	1	2	1	—	—	—	—	3
4. Scarlet Fever	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough	10	6	1	3	—	—	—	—	—	1
6. Diphtheria and Croup	2	—	—	1	1	—	—	—	—	2
7. Influenza	33	1	5	4	—	2	8	4	9	2
8. Erysipelas	—	—	—	—	—	—	—	—	—	—
9. Pulmonary Tuberculosis	58	—	—	—	1	13	26	15	3	16
10. Tuberculous Meningitis	4	3	—	—	1	—	—	—	—	3
11. Other Tuberculous Diseases	3	—	—	—	—	1	1	1	—	—
12. Cancer	63	—	—	—	1	—	3	35	24	11
13. Rheumatic Fever	1	—	—	—	—	—	—	1	—	1
14. Meningitis	5	2	1	—	—	1	1	—	—	1
15. Organic Heart Disease	63	1	—	—	1	3	9	14	35	5
16. Bronchitis	29	3	—	—	1	—	—	7	18	4
17. Pneumonia	31	7	2	3	2	2	2	9	4	10
18. Other Respiratory Diseases	5	—	—	—	—	—	—	3	2	—
19. Diarrhoea and Enteritis	3	—	2	1	—	—	—	—	—	—
20. Appendicitis	2	—	—	—	—	2	—	—	—	—
21. Cirrhosis of Liver	5	—	—	—	—	—	2	2	1	1
21a. Alcoholism	2	—	—	—	—	—	1	—	1	1
22. Nephritis	12	—	—	—	1	1	1	3	6	3
23. Puerperal Fever	2	—	—	—	—	1	1	—	—	2
24. Other accidents of Pregnancy and Parturition	2	—	—	—	—	1	1	—	—	1
25. Congenital Debility, etc.	33	32	1	—	—	—	—	—	—	3
26. Violent Deaths	13	1	—	—	1	3	—	3	5	3
27. Suicide	11	—	—	—	—	1	3	6	1	2
28. Other Defined Diseases	216	7	3	1	1	4	15	44	141	44
29. Ill-defined Diseases	8	3	—	1	—	—	1	1	2	3
Total	623	69	16	16	12	35	75	148	252	122
Sub-entry included in above figures : Syphilis	27	3	1	—	—	—	3	16	4	—

TABLE C.

Infant Mortality During 1922.

Causes of Death	Deaths from stated causes at various ages under one year of age.									Total Deaths under one year
	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	1-3 months	3-6 months	6-9 months	9-12 months	
Whooping Cough	—	—	—	—	—	1	1	3	1	6
Tuberculous Meningitis	—	—	—	—	—	1	1	—	1	3
Meningitis (not Tuberculous)	—	—	—	—	—	—	1	1	—	2
Bronchitis	—	—	—	—	—	—	1	1	1	3
Pneumonia (all forms)	—	—	—	—	—	4	—	2	1	7
Diarrhoea	—	—	—	—	—	—	—	—	—	—
Suffocation (overlying)	—	1	—	—	1	—	—	—	—	1
Injury at Birth	—	—	—	—	—	—	—	—	—	—
Premature Birth	16	3	4	1	24	2	—	—	—	26
Atrophy, Debility and Marasmus	1	1	1	—	3	1	—	—	1	5
Other causes	3	1	1	—	5	1	3	4	3	16
Total	20	6	6	1	33	10	7	11	8	69

TABLE D.

BIRTHS.

Births : Uncorrected Number, 865. Nett Number, 865. Rate : 19.5 per 1000 of population.

	Notified By				Total	Stillborn.	
	Notified By			Notified By			
	Doctors	Midwives	Parents	Doctors		Midwives	
Legitimate	185	193	10	20	408	16	10
	177	214	9	19	419	6	10
Illegitimate	7	8	—	—	15	—	—
	10	13	—	—	23	—	1
Total	192	201	10	20	423	16	10
	187	227	9	19	442	6	11
Grand Total	379	428	19	39	865	22	21

TABLE E.

Cesspools Emptied During 1922.

Place	No. of Cesspools	No. of times emptied	No. of loads removed
Alcester Road	5	8	22½
Alder Road	7	18	18
Beaconsfield Road	2	18	38¼
Bridgewater Road	3	29	44½
Brook Road	2	18	13
Canford Cliffs	10	35	75½
Cecil Road	6	22	29¼
Cornelia Crescent	5	15	26
Curtis Road	7	23	35
Fancy Road	4	32	78
Guest Avenue	9	14	24
Gordon Road	2	12	23¼
Hamworthy	93	405	772
Jubilee Road	3	14	45
Kinson Crescent	7	40	54
Lilliput	5	22	36½
Limekiln Road	7	70	119½
New Road	9	65	134
Old Wareham Road	17	86	150¾
Ringwood Road	26	206	449¾
Rossmore	5	27	36¾
Sandbanks	84	289	575½
Seldown	8	264	313
Stanley Green	11	14	26
Victoria Crescent	8	41	101¼
Wallis Down	20	40	101
Winston Avenue	17	44	116
Various	17	50	81¾
Totals	379	1921	3540

Note :—In addition to the above there are 182 pail closets, the contents of which were emptied on 9,464 occasions, or 52 times in the year.

TABLE F.

Housing.

Number of new houses erected during the year :—

(a) Total	145
(b) As part of the Municipal Housing Scheme	34

1. Unfit Dwelling Houses.

Inspection.

(1). Total number of dwelling houses inspected for housing defects under Public Health or Housing Acts.	955
(2). Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	10
(3). Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	3
(4). Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	245

2. Remedy of Defects without Service of Formal Notice.

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers	232
---	-----

3. Action under Statutory Powers.

A. <i>Proceedings under Section 28 of the Housing, Town Planning &c., Act., 1919</i>	Nil
(1). Number of dwelling houses in respect of which notices were served requiring repairs	10
(2). Number of dwelling houses which were rendered fit	
(a) By Owners	10
(b) By Local Authority in default of Owners	Nil
(3). Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declaration by Owners of intention to close.	1
B. <i>Proceedings under Public Health Act.</i>	
(1). Number of dwelling houses in respect of which notices were served requiring defects to be remedied :	
(a) By Owners.	10
(b) By Local Authority in default of Owners	Nil
C. <i>Proceedings under Sections 17 and 18 of the Housing, Town Planning, &c., Act, 1909</i>	
(1). Number of Representations made with a view to making of Closing Orders.	3
(2). Number of dwelling houses in respect of which Closing Orders were made	1
(3). Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit	Nil
(4). Number of dwelling houses in respect of which demolition orders were made.	Nil
(5). Number of dwelling houses demolished in pursuance of demolition orders	Nil

TABLE G.**Work of Inspectors regarding Nuisances and Defects.**

Nature of Nuisance	Mr. Ramsden	Mr. Wheeler	Total
Premises requiring repair	77	172	249
„ „ cleansing and limewashing	85	99	184
Drains choked	51	41	92
„ otherwise defective	126	78	204
Defective W.C. fittings	108	34	142
„ yard surfaces	5	26	31
„ eaves and downspouts	51	49	100
„ manure receptacle-	6	7	13
„ sinks	57	18	75
„ urinals	5	2	7
Animals improperly kept	3	12	15
Offensive accumulations	125	22	147
Other nuisances and defects	215	81	296
Total Nuisances and defects discovered			1555

TABLE H.

Work done by Sanitary Inspectors during 1922.

Nature of Work	Mr. Ramsden	Mr. Wheeler	Total
Total No. of visits to premises	2892	3219	6111
No. of Houses visited re Infectious Diseases	30	18	48
„ visits to such houses	42	26	68
„ houses disinfected after Infectious Diseases	38	28	66
„ houses (including Schools) disinfected after other Diseases	30	45	75
House drains, smoke tested	105	67	172
„ „ water tested	127	34	161
Inspection of Factories and Workshops	32	55	87
„ „ Greengrocers' shops	111	22	133
„ „ Fishmongers' shops	169	61	230
„ „ Picture Houses	—	5	5
„ „ Ice Cream Shops	—	10	10
„ „ Schools	14	22	36
„ „ Butchers' shops	302	301	603
„ „ Bakehouses	28	22	50
„ „ Common Lodging Houses	4	70	74
„ „ Houses let in Lodgings	—	34	34
„ „ Urinals	12	—	12
„ „ Fish Market	—	6	6
„ „ Dairies and Milkshops	33	30	63
„ „ Cowsheds	32	15	47
„ „ Slaughterhouses	264	253	517
„ „ Work in progress	245	201	446

TABLE I.

Amount of Unsound Food Destroyed.

	1919	1920	1921	1922
	lbs.	lbs.	lbs.	lbs.
Beef	21489 $\frac{3}{4}$	12332 $\frac{1}{2}$	5379	3063
Pork	748	1313	2019	575
Mutton	3544	358 $\frac{1}{2}$	195	36
Fish	15150	4294	3698	6843
Fruit	3549	36	336	56
Poultry	66 $\frac{1}{2}$	—	—	—
Cheese	22 $\frac{1}{2}$	—	—	—
Potatoes	29568	2287	—	—
Flour	1120	—	—	—
Rabbits	98	—	—	—
Eggs	—	—	74	—
Tomatoes	349	10	—	—
Shrimps	42	—	—	—
Artichokes	40	—	—	—
Sugar	1792 $\frac{1}{2}$	—	—	—
Condensed Milk	72	35	—	—
Butter	12	82 $\frac{1}{2}$	—	—
Whelks	—	—	130	—
Various	84 $\frac{1}{2}$	158	95	28

TABLE J.

Work done under the Food and Drugs Acts.

	Samples						
	Formal	Informal	Total	Genuine	Adulterated	Vendor cautioned	Vendor prosecuted
Milk	106	134	240	222	18	14	—
Skimmed Milk	4	—	4	4	—	—	—
Cream	3	—	3	3	—	—	—
Preserved Cream	1	—	1	1	—	—	—
Butter	12	—	12	12	—	—	—
Margarine	6	—	6	6	—	—	—
Lard	6	—	6	6	—	—	—
Suet	1	—	1	1	—	—	—
Dripping	1	1	2	2	—	—	—
Coffec	—	5	5	5	—	—	—
Coffee and Chicory	—	1	1	1	—	—	—
Pepper	—	2	2	2	—	2	—
Mustard	—	2	2	—	2	—	—
Baking Powder	—	2	2	2	—	—	—
Whiskey	4	—	4	4	—	—	—
Sausages	3	—	3	3	—	—	—
Ice Cream	2	—	2	2	—	—	—
Oatmeal	1	—	1	1	—	—	—
Stilton Cheese	1	—	1	1	—	—	—
Total	151	147	298	278	20	16	—

TABLE K.

Cases admitted to Alderney Isolation Hospital During the Year.

	Admitted from Borough	Admitted from Other Districts	Died during the year	Total number of cases admitted	Average duration in Hospital
Scarlet Fever	40	23	—	63	34 days
Admitted as S.F. but proving to be otherwise	1	—	—	1	2 „
Diphtheria	22	10	2	32	33 „
Diphtheria “car- riers” and posi- tive contacts	12	—	—	12	30 „
Admitted as Diphtheria, but proving to be otherwise	2	1	—	3	8 „
Measles	5	—	2	5	20 „
Encephalitis Lethargica	1	—	—	1	60 „
Ophthalmia Neonatorum	2	—	—	2	14 „
Puerperal Fever	3	—	1	3	13 „
Other Diseases	2	5	—	7	17 „
Total	90	39	5	129	—

TABLE L.

CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1922.

Notifiable Diseases	Number of Cases Notified.									Total Cases Notified in each Locality.					Total cases Removed to Hospital
	At all Ages	At ages—Years.								St. James	Longfleet	Ham-worthy	Brank-some	Park-stone	
		Under 1 year	1 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and up-wards	Ages not known						
Small Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera, Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria, (including Mem-braneous Croup)	33	—	4	22	5	1	—	—	1	16	3	1	10	3	36
Erysipelas	14	—	—	1	2	2	8	1	—	6	5	2	1	—	—
Scarlet Fever	46	—	2	33	3	6	1	—	1	6	5	1	22	12	41
Typhus Fever, “ Trench” Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Relapsing Fever, Continued Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever	2	—	—	—	1	1	—	—	—	1	—	—	1	—	3
Cerebro-spinal Meningitis	1	—	—	—	1	—	—	—	—	—	—	—	1	—	—
Poliomyelitis	1	—	1	—	—	—	—	—	—	—	—	—	1	—	—
Ophthalmia Neonatorum	9	9	—	—	—	—	—	—	—	2	—	1	5	1	2
Pulmonary Tuberculosis	70	—	1	11	15	31	9	1	2	15	6	—	36	13	—
Other forms of Tuberculosis	9	—	—	6	1	—	1	—	1	6	—	—	2	1	—
Malaria	8	—	—	—	3	5	—	—	—	2	2	—	—	4	—
Tubercular Meningitis	1	—	—	—	1	—	—	—	—	—	—	—	1	—	—
Chicken Pox	53	1	11	35	3	1	1	—	1	7	12	1	17	16	—
Encephalitis Lethargica	1	—	—	—	1	—	—	—	—	—	—	—	—	1	1
Influenzal Pneumonia	35	—	4	9	6	8	6	1	1	8	3	1	14	9	—
Dysentery—Amœbic and Cacillary	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Conditions	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7
Total	283	10	23	117	42	55	26	3	7	69	36	7	111	60	90

PART II.

Port Sanitation.

PORT OF POOLE.

PORT MEDICAL OFFICER'S REPORT.

The Medical Officer of Health for the Borough is also Port Medical Officer, and is assisted by Mr. P. W. Wheeler, Sanitary Inspector, who is Inspector of Nuisances to the Port. Close co-operation exists between the offices of H.M. Customs, the Harbour Master and the Medical Officer's Department.

The total tonnage of incoming traffic for the year (see Form A appended) shows a slight increase coming from abroad, while the coastwise traffic has nearly trebled the figures of 1921.

The average tonnage for vessels from abroad was 142, being an increase of 30 tons per boat. The coastal boats show a drop in average tonnage from 201 to 165.

The bulk of the traffic was with the Channel Islands, France, Belgium, Italy, Baltic Ports and all Coastal Ports.

Many of the vessels are regular traders with the Port, and enter the harbour several times a year.

No vessels have arrived during the year from any suspected or infected ports.

Two cases of venereal infection reported voluntarily to the Medical Officer, and were referred to the proper centre for treatment.

Sanitary defects were found on board 14 vessels. In 12 cases the defects were remedied after verbal notice, and in two cases after preliminary caution.

All ships visiting the port were clear of rats when inspected.

CHOLERA, PLAGUE, SMALL POX, &c.

Facilities for preventing the spread of infectious disease from on board ship and for the cleansing and disinfecting of verminous persons and their belongings are provided at Alderney and Baiter Isolation Hospitals of the Borough, the former of which is also the disinfecting and disinfestation station. A motor ambulance is available for transport purposes.

These arrangements are sufficient to cope with ordinary contingencies.

POOLE OYSTER FISHERIES.

The Harbour is closed for oyster fishing from 15th May to 3rd August inclusive each year. During this close season the Southern Sea Fisheries District investigated the nature of the effluent from the waste water pond and sewage plant of works at Holton Heath, where these drain into the foreshore. Samples of the water and of the sub-lying soil were taken for analysis. The Report received was sufficiently favourable as to decide the District Committee to take no further action in the meantime.

Prior to the 15th May, 500,000 oysters were dredged for the purpose of sale to " approved buyers " in accordance with Regulations in force.

As mentioned in my Report for 1921, the satisfactory outcome of the test of relaying Poole oysters at Shipstal Point resulted in official approval being given for opening up these layings for direct local marketing. A lease has now been arranged with the Poole Fishermen's Association, and it will be permissible for half a million oysters to be dredged, relaid and put on the market by May next.

The following extract from a recent report of the Chief Fishery Officer to the Southern Sea Fisheries District Committee summarises the local position as at December, 1922 :—

Poole Harbour. " In October I made inspection of the oyster grounds in Poole Harbour and I found that notwithstanding the cleansing that took place in March and April last, there were places where the grounds were very foul owing to the presence of ascidia and were in urgent need of cleansing. As in the case of the oyster fishery in the Solent, the ratio of mortality is decreasing, which circumstance is evidenced by the small number of clean empty claps that have been taken whilst dredging. The serious nature of the mortality that has been observed is shown by the very large number of claps (having live growths upon the interior of the shells) that have been taken when dredging. The loss from this cause I compute to amount in the aggregate to many millions during the period covered by the three years, 1920, 1921 and 1922. "

As some years must necessarily elapse before the fishery will resume its former state, I am of opinion that the grounds should not be depleted by undue dredging and that careful investigations should be made before sanction is given to the dredging of any particular number of oysters."

FORM A.

**AMOUNT OF SHIPPING ENTERING THE PORT SANITARY DISTRICT
DURING THE YEAR 1922.**

	Number	Ton'ge	Number Inspected		Number reported to be defective	Number of Orders issued
			By the Medical Officer Health	By the Ins'pr of Nuisances		
Foreign {	Steamers	181	26620	6	98	3
	Sailing	35	3800	2	14	nil
	Fishing	—	—	—	—	—
Total Foreign		216	30420	8	112	3
Coastwise {	Steamers	729	120735	9	361	9
	Sailing	140	9518	2	106	2
	Fishing	—	—	—	—	—
Total Coastwise		869	130253	11	467	11
Total Foreign and Coastwise		1085	160673	19	579	14

PART III.

Maternity and Child Welfare.

MATERNITY AND CHILD WELFARE.

To the Chairman and Members of the Maternity and Child Welfare Committee.

Ladies and Gentlemen,

I have the honour to present my Report for the year 1922.

A full description of the Organisation, scope and aims of the Maternity and Child Welfare Scheme of the Borough was given in the Annual Report for 1921. (pp. 29-33).

No outstanding change has taken place during the year. I therefore limit my report so far as possible to a recapitulation of the work done, with comparative notes where such are of interest.

At the Royal Sanitary Institute Congress held at Bournemouth in July, I drew the attention of the Conference to the existing abuse of legislation framed in the interests of Motherhood and Infant life, in a paper entitled "A loophole in the Midwives Act." This loophole allows the unskilled and often illiterate handywoman a highly dangerous freedom of action in midwifery work, if the medical practitioner who supports her services is content to sacrifice the ethics of his profession for a verbal quibble.

I appear to have brought to a focus a considerable amount of public opinion on a point upon which the need for action was ripe, as the Royal Sanitary Institute and the Central Midwives Board have since made representations to the Ministry of Health with a view to having the wording of the Act amended, so as to allow of no equivocation.

I wish to thank all associated with me, directly or indirectly, in this branch of Public Health work for their assistance and support.

I have the honour to be

Your obedient Servant

R. J. MAULE HORNE.

MATERNITY AND CHILD WELFARE. INFANTILE MORTALITY.

Sixty-nine infants under one year died during 1922. This gives a rate of 79·7 deaths out of each 1,000 births, and compares with 77 per 1,000 for England and Wales as a whole. This latter figure is a record in infant life saved for the country.

In 1921 the Borough figure was 73·6. Our set-back in 1922 can be attributed chiefly to the prevalence of whooping-cough in the early months of the year, which accounted for seven deaths, as against 1 in 1921, and of measles in the later months, the deaths from pneumonia, a common complication, being seven as against 2. These two infectious diseases take their greatest toll in infant lives, whooping cough especially in the first year, and in the first six months of that year, measles in the second six months of infancy ; and both together find the great bulk of all their victims in the child under 5 years of age. The Ministry of Health recognise their seriousness and encourage treatment and also that of ophthalmia under a child welfare scheme, in isolation hospitals. This arrangement is now adopted by the admission of suitable cases to Alderney Hospital.

There were 865 live births of which 38 were illegitimate. Deaths among the latter represented a rate of 132 deaths per 1,000 births.

Of the 69 infantile deaths, 33, or 48%, died within four weeks of birth. In 26 of the total, death is ascribed to premature birth. There were also 43 stillbirths not included in the above figures, so that 69 potential lives, representing about 8% of all births, were lost directly or indirectly through some antenatal cause affecting the mother.

MATERNAL MORTALITY.

Four mothers were notified during the year as having died from complications of childbirth—one being due to puerperal fever proper.

WORK DONE UNDER THE BOROUGH SCHEME.

The Medical Officer of Health, assisted by two full time Health Visitors possessing the certificate of the Central Midwives Board, has carried out the following work during the year :—

(1.). *Home Visiting.* The Health Visitors and the Medical Officer, where considered necessary, have paid 9,054 visits and have

given antenatal advice to expectant mothers on 812 occasions.

2,031 infants and young children were found to be making satisfactory progress, 205 were in moderate condition only, 9 were not thriving, and 71 died.

(2). *Antenatal and Postnatal Clinics*, held at the Poole Clinic, Municipal Buildings, on Mondays at 4 p.m., and on Thursdays at 11 a.m., and at the Branksome Council Buildings Clinic on Tuesdays and Fridays at 2 p.m.

The Medical Officer attends personally all clinics. At these, advice, and where advisable, treatment have been given to 201 expectant or nursing mothers, who made 775 attendances; to mothers on behalf of their infants in 363 individual cases, who made 1,661 clinic visits.

The conditions dealt with amongst the infants were as follows :

Developmental	42
Circulatory	23
Respiratory	74
Alimentary	192
Genito-urinary	11
Ears	17
Mental	2
Bone	1
Joints	1
Skin	111
Eyes	21
Miscellaneous	12
In good health	65
	<hr/>
Total	572
	<hr/>

(3.) *Issues of Milk and Dried Milk*. In certain cases and under close supervision dried milk is sold at cost price for use of infants where, for definite reasons, the mother's milk is not available, or where seasonal conditions render ordinary cows' milk undesirable. This part of the Scheme is self-supporting, but no profit accrues.

Milk at reduced rates, or free issues of cows' milk are allowed—in all cases to the amount of one pint per individual per day—where the household income does not exceed a sliding scale, approved of by the Ministry of Health. It has been granted, usually in 4 weekly periods, and renewable, in 182 cases, as against 241 cases in 1921.

In accordance with the representations of the Ministry this

assistance has been granted only to those expecting to become mothers within three months, to nursing mothers, or to infants under 12 months—with three exceptions.

Experience shows, however, that with the conditions of income prevailing in the great bulk of these families, the second year becomes seriously handicapped for the infant. If the mother has weaned her child at the ninth month, the child has only got well accustomed to cows' milk in its diet when the supply falls off. If the child has been bottle fed throughout, it is likely to feel more severely the change to the uncertain fare, of doubtful nutritive value, of the "unemployed" home after its twelfth month. It has not the "reserve" which the breast-fed baby has acquired. Again, breast-feeding after the twelfth month is encouraged, with consequent drain on the mother's health, and antenatal starvation for a possible next-comer.

It is to be hoped that the second year will be allowed to receive more consideration, provided that expenditure can be kept within moderate bounds. In estimating for our own immediate needs in Poole, both these points have been taken into account.

(4). *Hospital services for Maternity and its Complications.* Accommodation is provided at Cornelia General Hospital, and at the Borough Isolation Hospital (for Puerperal cases).

In 1921, 16 cases in all were admitted. There were no deaths. In 1922, 19 cases were dealt with, with 2 deaths. 14 of these cases were emergency or anticipated complications. Details are to be found in Table I.

Under this part of the Scheme £42 7s. 6d. was recovered from the patients during the year.

(5). *Hospital Treatment under Child Welfare Scheme.* 32 infants and young children—the same number as in the previous year—have received attention as in-patients, 25 at Cornelia Hospital, and 7 at the Borough Isolation Hospital. One out-patient case was also treated. Contributions from parents amounted to £2 15s. 0d. Details are to be found in Table II.

(6). *Boarded-out Children.*—Supervision of these is carried out by this Department by arrangement with the Board of Guardians. The Health Visitors, in their capacity as Infant Care Protection Officers, have had supervision, under the Medical Officer, of 93 boarded-out children. 681 visits have been paid to these. 82 were found to be progressing well under healthy conditions. 10 were in moderate condition, and one died.

VOLUNTARY WORK.

The Borough of Poole Maternity and Child Welfare Association, subsidised, and under the guidance of the Medical Officer and the Health Visitors, continues to give most valuable support to the aims of the Municipal Scheme.

Drs. Hutton, Peake, Fiske and Nicol have held 101 medical consultation clinics, at which 3,100 attendances were made by those of the 388 enrolled infants requiring advice. 322 mothers made 5,200 attendances at the 5 centres, where 95 health lectures were given, amongst the other activities of the Association. In the toddlers' nurseries there were 4,856 attendances. The Superintendent paid 1,338 visits to homes.

UNMARRIED MOTHERS.

A home for girls awaiting confinement and for unmarried mothers with their infants, with four beds and four cots, is maintained by voluntary help at "Oak Tree Lodge," Lower Parkstone.

ILLEGITIMATE INFANTS.

"Fairholme," Commercial Road, Parkstone, is a home for 20 infants under 1 year, receiving an annual grant from Government funds, and subject to the supervision of the Medical Officer of Health. During the year, 9 infants found a temporary home in the former premises. "Parkmoor," Bournemouth Road, which have now been vacated for the new and larger quarters, while the mothers earned their living and assisted in the maintenance of their children.

OPHTHALMIA OF THE NEW-BORN.

There has been a welcome reduction in the incidence of this damaging infection, from 21 in 1921, to 9 during 1922, with the following result :—

Treated			Result.			
At home	As out-patients	In Hospital	Vision unimpaired	Vision impaired	Total blindness	Died.
3	3	3	3			
			3			
			3			

HEALTH WEEK AND BABY WEEK.

These were combined into one effort, the lines of activity being described in the Public Health Section of this Report.

MATERNITY AND CHILD WELFARE, 1922.

MATERNITY.

Particulars of Cases admitted to Cornelia and Borough Isolation Hospitals

TABLE I.

No of Cases	Nature of Case.	No. of Deliv- eries.	Mat- ernal	Deaths.				Abor- tions
				Infantile		Stillbirths		
				M.	F.	M.	F.	
2	Contracted Pelvis	2						
1	Osteomalacic Pelvis	1			1			
1	Hyperemesis Gravid- arum	1						
1	Antepartum Haemor- rhage :							
	Accidental : external	1						
1	Unavoidable : pla- centa praevia	1						1
1	Chorea Gravidarum	1	1					
1	Malpresentation	1						
1	Labial abscess	1						
1	Organic heart disease	1						
1	Shock, snake bite	1						
3	Puerperal Septicaemia		1					
1	Unsuitable home con- ditions	1						
4	Accommodation	4						
19		16	2		1			1

MATERNITY AND CHILD WELFARE, 1922.
CHILD WELFARE.

Particulars of cases treated at Cornelia and Borough Isolation Hospitals.

TABLE II.

Provisional Diagnosis.	Discharged			Re-main- ing in Hos- pital	Died.	Total
	In good health	Impr'v'd	No Improve- ment.			
Tabs Mesenterica	1				1	2
Marasmus :						
Nutritional	6		1		2	9
Congenital specific				1		1
Seborrhoeic Eczema	1					1
Rachitis		1				1
Ophthalmia Neonatorum	2					2
Ophthalmia and prematurity		1				1
Bronchitis	1					1
Congestion of Lungs			1 (a)			1
Dietetic errors	1					1
Debility, post pneumonic	1					1
Bronchitis, cervical abscess	1	2				3
Paralysis (post-operative) and Debility						
Enteritis	1	1				1
Marasmus and Harelip						
Harelip and Cleft Palate		1				1
Measles and Broncho-Pneumonia	3				1	4
Phimosis	1 (b)					1
	19	7	2	1	4	33

(a). *Removed to home, found to be suffering from Whooping Cough.*
(b). *Out-patient.*

PART IV.



School Medical Service.

PREFACE.

To the Chairman and Members of the Education Committee.

Ladies and Gentlemen,

I have the honour to present my Report on the School Medical Service for the year 1922. My remarks running through this statistical review explain the year's work as compared with the year 1921.

There is no outstanding point to note, except that steady progress is being made, and that this progress is being achieved with the very real support and co-operation of the Educational Staff.

To all who have assisted in the work, whether in the Schools, in Committee, in Clinic or in Office, I tender my thanks.

I am,

Your obedient Servant,

R. J. MAULE HORNE,

School Medical Officer.

April, 1923.

PRELIMINARY.

There are in the Borough fifteen Elementary Schools with a total of 34 Departments. The accommodation is for 6,553 children, and there were 6,138 names on the Registers at the end of the year.

The fact that the School Medical Officer is at the same time Medical Officer of Health, in charge of the Borough's Maternity and Child Welfare Scheme, and Medical Superintendent of the Borough Isolation Hospitals, admits of a unification of control, a continuity of effort, and a possibility of "following-up," which becomes more difficult of achievement in a community of larger numbers.

A School Medical Service is firstly preventive, secondly advisory and thirdly curative. In its preventive aspect, its function is to keep healthy school children well, and to safeguard them where possible from unhealthy contact. In its advisory aspect, its function is to detect incipient or unknown ill-health in the school child, and to direct it to its proper curative guide, the family Doctor. The curative aspect takes shape in two forms—(a), to deal with such minor ailments as do not in themselves demand a Doctor's services, but which, if left uncontrolled, may ultimately become more serious, to the detriment of educational progress, and (b), to organise a scheme of treatment for crippling defects of a more specialised nature, which, though requiring expenditure prohibitive in many individual cases, yet when so organised can be economically brought within reach of all whose health will benefit by its application.

As being special in nature, the defects require specialised treatment, hence the co-operation in the scheme of the services of the local specialist in each sphere—the Eye, the Nose and Throat, the X-Ray and the Dental Specialist.

To carry the service into effect in as complete a manner as possible the work is sub-divided into

- (1). Routine and Special Medical Inspections by the School Medical Officer, with School Nurse and clerical assistance.
- (2). Class-by-Class inspections by School Nurses.
- (3). Clinics for advice and treatment.
- (4). Following-up.

Medical Inspections—To systematise this work, all children at entrance and at fixed age periods in their curriculum are thoroughly examined. Parents are in all cases invited to be present. Chil-

dren who are found to have some definite defect or defects are scheduled as "specials" for re-examination every three months, unless in the meantime the defects which can be so corrected have been attended to either by the parents' arrangements with the family doctor, or by means of the School Clinic system in operation.

These medical inspections apply at present to Elementary Schools only.

Class-by-Class Inspections.—The School Nurses visit Schools daily for the purpose of making rapid surveys of general scope, such as personal cleanliness, to detect undesirable, contagious, or possibly infectious conditions, and to act generally in co-operation with the School staff in preserving the general health tone of the Schools.

Clinics. Facilities for advice and treatment are provided as follows :

(a) *Minor Ailment Clinics.*

Poole, Council Buildings. Each School day at 9.30 a.m.,
Branksome, Council Buildings. Tuesdays and Fridays at 2.30 p.m.

Newtown, Branksome Heath School, annexe. Every School day at 9 a.m.

Every child sent to the Clinic by General Practitioner, by School Head, by School Nurse, by School Attendance Officer, or by Parent, is seen by the School Medical Officer, who determines whether each is a suitable case for Clinic treatment, and if so, arranges for treatment accordingly. If the defect is of a special nature calling for the services of a specialist, the child in course receives attention at one of the following operative Clinics :—

(b). *Dental Clinic.* Poole Council Buildings, Mondays, Wednesdays and Fridays, 2 p.m.

(c). *Eye Clinic.* Cornelia Hospital, each Tuesday and Friday morning at 10.45 a.m.

(d). *Nose and Throat Clinic.* Cornelia Hospital, each Wednesday morning at 10.30 a.m.

(e). *X-Ray Clinic for Treatment of Ringworm.* Cornelia Hospital, each Monday afternoon at 4.30 p.m.

For the abnormal child—the dull and backward, the deaf, the blind or partially blind, the cripple and the mentally defective—the aim is to arrange in suitable cases for admission to a special class, school or institution, where the child's disability may present

the minimum of disadvantage to himself and those around him and offer the best chance of progress.

Following-up. This is one of the most important and necessary parts of the work.

At the periodical medical inspection in School, certain children, whom for a special reason it is desirable to see again, are distinguished as "specials." These re-appear at the next three-monthly inspection. The reason may be that the mother has expressed her desire to have the teeth, eyes, throat or other defect which has been pointed out to her, attended to under her own arrangement, or the defect seen may give indication of being of a temporary nature. Or again, the condition may be one that a few visits and advice from the School Nurse can rectify.

Unaccountable absences from school are followed up by the School Attendance Officers. Many of these absentees are subsequently referred to the Clinics.

GENERAL REVIEW OF SCHOOL MEDICAL EXAMINATION.

During the year 801 Entrants, 273 Intermediates and 560 Leavers were examined by the School Medical Officer—a total of 1,634 as compared with 1,454 in 1921.

In addition, 3,481 Special Cases and ailing children were seen, an increase of 604 over the previous year ; and re-examinations of these amounted to 9,418.

5,115 individual children thus passed through the Medical Officer's hands, an increase of 784.

Apart from this, the School Nurses paid 420 " rapid inspection " visits to schools, covering in these inspections 36,096 children, and passing on to the Clinics for necessary advice or treatment 572 of the children seen.

384 visits were made to the homes of school children in connection with outbreaks of Infectious Diseases.

In the work of " following-up," visits to the home were made as follows :—

For Uncleanliness	182
Diseases of Skin.....	161
Diseases of Eye	33
Diseases of Ear	28
Diseases Nose and Throat	94
Dental Defects	176
Other Conditions	490

Clothing and Footwear. Of 1,634 children examined, 12 were found definitely unsatisfactory in this respect. This is less than half the proportion found in 1921.

Nutrition. 44 of the 1,634 children could be described as below par to such an extent as to render the way easy for chronic or permanent ill-health. The proportion shows no variation from the previous year. Unemployment and food of poor nutritive value are in the main responsible.

Uncleanliness. 227 of the 1,634 children were found to have numerous nits of the head-louse in their hair. 166 had prominent marks of the bites of fleas. In many both conditions were present.

The proportion of the total examined is virtually unchanged from last year. The stigma of such a high proportion also remains.

Teeth. The test of the value of the School Dentist's work should be the gradual diminution of the proportion of children with gross dental defects.

While the re-modelled service has only been in force for two years, indications are not wanting that the desired result is beginning to take shape.

The increase in the percentage of children examined in school who present a set of good teeth, is seen below :—

	1920	1921	1922
ALL TEETH SOUND	36	39.5	44.5
1-3 DEFECTIVE	51	40.5	35.3
4 OR MORE DEFECTIVE	13	20.0	20.2
	100	100	100

This is as it should be, and it is hoped that the improvement can be credited to the spread of education in Health matters, combined with the facilities for advice and treatment.

Skin. Amongst the 1,634 children, two had Ringworm of the Hair, and 5 Ringworm of the Body. Two had Scabies, 6 Impetigo and 22 some other unhealthy condition of the Skin. This represents an improvement of 28 per cent. on the conditions found in 1921. These figures do not include school children who have been sent during the year by the School staffs or Nurses to the School Clinics for some skin condition found from day to day.

Eyes. 115 of the 1,634 children had defective vision, and

a further 13 suffered from squint. This, again, shows a good reduction on 1921—of 32 per cent.—but is modified by the larger percentage of younger children examined.

Ears. 39 of the 1,634 children had some amount of deafness, in 25 instances the deafness being consequent upon a catarrhal inflammation affecting the ear-drum. In a smaller number the disability was definitely associated with existing Enlarged Tonsils.

Nose and Throat. 366 of the 1,634 children showed Tonsils which at the time of examination were unhealthy. In 8 of these there were also definite adenoid growths, apart from many others where this condition was only slight.

The proportions found show practically no change on the previous year's figures.

A group of 76 children who had received operative treatment on account of Enlarged Tonsils and Adenoids two or more years before, was specially investigated. The parents in 59 cases agreed that definite benefit had resulted, while in 17 no difference had been noted.

Enlarged Glands in the Neck. 150 of the 1,634 children were found to have glands which were then or had lately been reacting to some unhealthy condition of the Scalp, Nose, Ears, Throat, or Teeth. Here again the figures agree closely with those of the previous year.

Heart and Circulation. 27 cases where the heart was not organically normal were noted, and necessary advice given to the parents. Two of the conditions were congenital.

A further 13 cases of invalidity resulted from an impoverished condition of the blood.

Lungs. 43 children were subject to recurrent Bronchitis. One was found to be definitely Tubercular, and 15 could be described as "pre-tubercular," and suitable for an open-air school.

Vaccination. Efficient vaccination is taken as being achieved by 3 or more marks. In 1922,

of 801 children under 8, 19·8% were found efficiently vaccinated, 75·9% entirely unvaccinated.

of 273 children of 8-9, 11·7% were found efficiently vaccinated, 84·6% entirely unvaccinated.

of 560 children of 12-13, 20·9% were found efficiently vaccinated, 68·75% entirely unvaccinated.

Attendance of Parents. The parents of all children to be examined are requested to attend so that in case of abnormal

conditions an accurate history of the defect can be ascertained and suitable advice given.

In the case of children undergoing their first examination at the hands of the Medical Officer, a parent or guardian was present in 56 per cent. of the whole. This is a very marked increase on the 41 per cent. of 1921, and indicates the greater interest taken by the parents in this work for the maintenance of the health of childhood.

With Intermediate children, parents attended with 30% as against 19·7% in 1921, and with the older children parents were present with 19% compared with 10·4% in 1921.

MINOR TREATMENT AND OPERATIVE CLINICS.

Record of Work Done.

Uncleanliness of the Head in the form of nits or vermin was dealt with in the case of 91 children—a similar proportion of the whole to the previous year. A charge of one shilling was made in 19 cases, for cleansing carried out in the Clinics.

Exclusion from school with consequent loss of grant required to be enforced in 47 cases.

Skin Conditions. Ringworm of the hair was treated in 75 cases, a ratio similar to 1921. Twelve of these cases were subjected to X-Ray Treatment at Cornelia Hospital under the Scheme. Three parents refused this form of treatment in intractable cases, and have thus incurred a prolonged exclusion from school, and loss of grant for the child, which might with a little parental consideration have been avoided.

Ringworm of the body has diminished 30% on 1921.

Scabies or Itch. This distressing contagious complaint, associated as all verminous complaints are originally with want of cleanliness, was found in 66 children. In the great majority of cases the condition was confined to the hands. The incidence is 28% less than in 1921, which was 100% less than 1920, so that gradually the condition is being stamped out.

Impetigo and Septic Bruises and Sores. 709 cases—a reduction of 6 per cent. on 1921—received treatment. The great majority of cases of contagious Impetigo were taken in hand—thanks being due in great part to the vigilance of the School staffs—in time to prevent general spread.

Only one severe case of generalised Impetigo and Ecthyma, in a girl of 13, required a prolonged absence from school.

Nose and Throat. 114 children with unhealthy Tonsils and Adenoid growths were dealt with through the School Clinic. The proportion remains as in the previous year.

57 of these received operative treatment at Cornelia Hospital under the Borough Scheme.

Defective Teeth. 197 children voluntarily attended the Clinic for Dental treatment. On account of the condition of their teeth, 144 were referred by the Medical Officer during his School Medical Inspections and 2,308 by the School Dentists.

The total actually receiving Clinic treatment was 1,456, being 55 per cent. of the whole.

Visual Defects. The number of children referred to the Refraction Clinic at Cornelia Hospital from all sources was 447. As systematic School Medical Inspection proceeds, the number of uncorrected visual defects should diminish. The reduction from the previous year's figure of 704 is therefore in accordance with expectation.

Of those for whom glasses were prescribed, 72·6 per cent. (an increase of 1·6 per cent. on 1921) took advantage of this School Service.

The total cost to the Authority for provision of glasses was £34 2s. 3d., to which the parents contributed £15 17s. 6d., or 46·5 per cent., as against 41·3 per cent. in 1921.

Chest Conditions. Twelve definite cases of Pulmonary Tuberculosis were kept under observation in conjunction with the Tuberculosis Officer under the County Scheme.

57 cases of "pre-tubercular" type were also taken under supervision. For these, and for another 54 already classed as suitable, the provision of an open air school would mean a better chance of improvement both in health and education. 54 subjects of chronic Bronchitis or of asthmatical tendency were also dealt with.

Re-examinations. Special observation was made on a group of children with a view to determining progress, where definite advice was given at the original inspection. The results are tabulated below :—

Defect.	No. re- exam'd	No Change.		Improved.		Rectified.	
		No.	P're'nt'ge	No.	P're'nt'ge	No.	P're'nt'ge
Nits	46	20	43.5	18	39.1	8	17.4
Fleabites	61	15	24.6	29	47.5	17	27.9
Enl'd. Glands		1	12.5	3	37.5	4	50.0
Enl'd. Tonsils	42	20	47.6	17	40.5	5	11.9
Malnutrition	3	1	33.3	2	66.7	—	—
Total Defects	160	57	35.6	69	43.1	34	21.3

Abnormal Children. Table III. gives particulars of all exceptional children of School Age. Special classes (associated with Elementary Schools for normal children) for the merely dull and backward, the victims mostly of constitutional defects, a Special School for the higher grades of feeble-minded children, and an Open-Air School for the physically hampered child, are projects which are of necessity very difficult to advance under existing conditions, but which none the less demand serious consideration.

Irregular Attendances. Under the School Attendance Byelaws, 59 children appeared before the magistrates, in many cases oftener than once, to account for very irregular attendances. Fines were inflicted in 36 instances, and two boys were sent to an Industrial School.

Part-time Employment. Certificates under the Employment of Children Act, 1903, and the Education Act, 1918, have been issued to 18 boys over twelve years of age.

General Remarks. A glance at the facts and figures given above would appear to indicate that, with regard to defects dependent to a considerable extent on conditions governing daily life (or habit of life) e.g., obsolete housing, lack of sufficient fresh air, insufficiency of water, food of doubtful nutritive value, the result is "no change." Such conditions are Malnutrition, Cleanliness of Head and Skin, Unhealthy Ears, Noses and Throats with their associated glands.

On the other hand, conditions which can be more effectually modified by means of practical Clinic work—such as defective teeth, abnormal eyesight or squint, contagious skin affections, e.g., Impetigo, Scabies, Ringworm—show a marked improvement.

The percentage attendance of Elementary School children for the year 1921 was 89.9. In 1922 the corresponding figure was

88.1. During this year, three unwelcome visitors militated against a good record—"influenza," Whooping Cough, and Measles. While the first mentioned may recur yearly to a certain extent, Whooping Cough and Measles have a tendency to occur as epidemics at longer intervals of from two to four years. We may therefore be spared the effects of these in 1923.

On the other hand, the incidence of the ordinary infectious fevers, Scarlet Fever and Diphtheria, has been in 1922 only half that of the previous year, which was in itself light.

There are about 300 children differing from the normal in some respect, but attending the ordinary elementary schools—about one in every 20 children—who impede the normal progress of their classes, both educationally and from the Grant-earning point of view. For these the Open-Air School, the Special Class or the Special School are required. It is a matter of experience that the physically backward child who gives a 30 per cent. attendance at an ordinary class, will give a 90 per cent. attendance at an Open-Air School.

Less than 20 out of each 100 children in the Borough are efficiently vaccinated. Let the parents of the odd 80 per cent., who are risking their children's lives from what is described—erroneously, except in a very small minority,—as conscientious objection, search again their conscience.

LIST OF TABLES.

1. Number of Children Inspected.
2. Number of Defects found in the Course of Medical Inspection.
3. Numerical Return of Exceptional Children.
4. A.—Treatment of Defects of Children.
B.—Treatment of Visual Defects.
C.—Treatment of Defects of Nose and Throat.
D.—Treatment of Dental Defects.
5. Summary of Treatment of Defects.
6. Summary of Children Medically Inspected.
7. Record of Work at Minor Ailment Treatment Centres.
8. Statistics of Attendances, etc.

TABLE I.

**Number of Children Inspected 1st January, 1922, to
31st December, 1922.**

A. Routine Medical Inspection.

Age	Entrants.					Total
	3	4	5	6	Other ages.	
Boys	30	86	123	140	64	443
Girls	24	53	95	139	47	358
Totals	54	139	218	279	111	801

Age	Inter- mediate Group	Leavers			Other Ages	Total	Grand Total
	8	12	13	14			
Boys	149	298	7	1	—	306	898
Girls	124	252	2	—	—	254	736
Totals	273	550	9	1	—	560	1634

B. Special Inspections.

Intermediate Group other than 8 years.	Special Cases and ailing Children	Re-Examinations.
Nil	3481	9418

**C. Total number of individual children inspected by the
Medical Officer, whether as Routine or Special Cases.**

Total No. of Individual Children Inspected.
5115

TABLE II.

Return of Defects found in the Course of Medical Inspection in 1922.

Defect or Disease		Routine Inspection		Specials	
		Number referred for treatment	Number requiring to be kept under observation but not referred for treatment	Number referred for treatment	Number requiring to be kept under observation but not referred for treatment
SKIN	Malnutrition	44		2	
	Uncleanliness—Head	227		91	
	—Body	166		10	
	Ringworm —Head	2		75	
	—Body	5		54	
	Scabies	2		66	
	Impetigo	6		708	
	Injuries	—		272	
	Other Diseases (non-Tubercular)	22		142	
	Defective Vision and Squint	128		94	
EYE	External Eye Disease	46		147	
EAR	Defective Hearing	14		30	
	Other Ear Diseases	25		95	
NOSE AND THROAT	Dental Diseases (see also Table IV.D.)	329	578	197	
	Enlarged Tonsils and Adenoids	366		114	
	Enlarged Cervical Glands (non-tubercular)	150		84	
	Defective Speech	13		7	
HEART AND CIRCULATION	Heart Disease—Organic		27		6
	—Functional		7		
	Anaemia	6			
LUNGS	Pulmonary Tuberculosis —Definite	1		11	
	—Suspected	15		42	
	Chronic Bronchitis	43		54	
NERVOUS SYSTEM	Other Disease		1		
	Epilepsy				1
	Chorea				2
TUBERCULOSIS	Other Disease		9		11
	Non-pulmonary Tuberculosis —Glands			9	
	—Bones and Joints		1		2
	—Other Forms		1		1
	Rickets		2		5
	Deformities	8	35		13
	Other Defects and Diseases	5	30	335	628
Number of defects which required treatment, or to be kept under observation		5622			

TABLE III.

Numerical Return of all Exceptional Children in the Area in 1922.

		Boys	Girls	Total
BLIND (including partially blind) within the meaning of the Elementary Education (Blind and Deaf Children) Act, 1893	Attending Public Elementary Schools Attending Certified Schools for the Blind Not at School	— 3 —	1 1 —	1 4 —
	Attending Public Elementary Schools Attending Certified Schools for the Deaf Not at School	— — 2	— — 1	— — 3
	Attending Public Elementary School Attending Certified Schools for Mentally Defective Children Notified to the Local Control Authority by Local Education Authority during the year Not at School	1 — 3	2 — 5	3 — 8
MENTALLY DEFICIENT.	At School Not at School	— 7	— 2	— 9
	IMBECILES	—	—	—
	IDIOTS	—	—	—
EPILEPTICS	Attending Public Elementary Schools Attending Certified Schools for Epileptics In Institutions other than Certified Schools Not at School	1 — — 2	— — — 1	1 — — 3
	Attending Public Elementary Schools Attending Certified Schools for Physically Defective Children In Institutions other than Certified Schools Not at School	26 — — —	17 — — —	43 — — —
	Attending Public Elementary Schools Attending Certified Schools for Physically Defective Children Institutions other than Certified Schools Not at School	3 1 — —	1 — — —	4 1 — —
PHYSICALLY DEFECTIVE.	Attending Public Elementary Schools Attending Certified Schools for Physically Defective Children In Institutions other than Certified Schools Not at School	10 — — —	8 — — —	18 — — —
	Attending Public Elementary Schools Attending Open-air Schools Attending Certified Schools for Physically Defective Children, other than Open-air School's Not at School	53 — — — —	43 — — — —	96 — — — —
	Retarded 2 years. Retarded 3 years.	15 —	18 —	33 —
DULL OR BACKWARD				

Treatment of Defects of Children during 1922.

Condition	No. of defects for which treatment was considered necessary	No. of Defects for which no report is available	No. of Defects treated	No. of defects not treated	Percentage of Defects treated
Cleanliness of Head	318	—	318	—	100
Cleanliness of Body	170	170	—	—	—
Nutrition	46	46	—	—	—
Nose and Throat (not including Sore Throat)	480	309	171	—	35
External eye disease	193	46	147	—	76
Ear Disease	120	25	95	—	79
Teeth	2649	1193	1456	—	55
Heart and circulation	—	—	—	—	—
Lungs	69	—	69	—	100
Nervous System	—	—	—	—	—
Skin	1354	37	1317	—	97
Rickets	—	—	—	—	—
Deformities	8	—	8	—	100
Tuberculosis—non-pulmonary	9	—	9	—	100
Speech	20	—	20	—	100
Mental Condition	8	—	—	8	—
Vision and Squint	326	125	201	—	62
Hearing	44	14	30	—	70
Miscellaneous	240	6	234	—	98
Total	6054	1971	4075	8	67

TABLE IV B.

Treatment of Visual Defect.

Number of Children.									
Referred for Refraction	Submitted to Refraction				For whom glasses were prescribed	For whom glasses were provided	Recommended for treatment other than by glasses	Received other forms of treatment	For whom no treatment was considered necessary
	Under local Education Authority's Scheme-Clinic or Hospital	By Private Practitioner or hospital	Otherwise	Total					
447	201	—	—	201	161	117	40	40	201

TABLE IV. C.

Treatment of defects of Nose and Throat.

Referred for treatment	Number of Children			
	Received Operative Treatment			Received other forms of Treatment
	Under local Education Authority's Scheme-Clinic or Hospital	By private Practitioner or hospital	Total	
480	57	—	57	114

TABLE IV D.

Treatment of Dental Defects.

1. Number of Children Dealt With.

	Age Groups										"Specials"	Total
	5	6	7	8	9	10	11	12	13	14		
(a) Inspected by dentist	—	280	444	614	688	652	630	391	—	—	—	3649
(b) Referred for treatment	—	180	302	384	473	412	336	221	—	—	—	2308
(c) Actually treated	—	145	220	234	258	234	215	150	—	—	—	1456
(d) Re-treated* (result of periodical examination)	—	—	—	—	—	—	—	—	—	—	—	—

*It is understood that cases under this head are also included under (c) above.

2. Particulars of Time given and of Operations undertaken.

No. of hours devoted to Inspection	No. of hours devoted to Treatment	Total No. of attendances made by the children at the Clinic	No. of permanent Teeth		No. of temporary Teeth		Total No. of Fillings	No. of Administrations of General Anaesthetics included in (4) and (6)	No. of other operations	
			Ex-tracted	Filled	Ex-tracted	Filled			Permanent Teeth	Temporary Teeth
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
78	258	1456	425	152	1942	—	152	187	—	—

TABLE V.**Summary of Treatment of Defects as Shown in Table IV.**

Disease or Defect	Number of Children			
	Referred for Treatment	Treated		
		Under local Education Authority's Scheme	Otherwise	Total
Minor Ailments	2199	1907	—	1907
Visual Defects	326	201	—	201
Defects of Nose and Throat	480	171	—	171
Dental Defects	2649	1456	—	1456
Other Defects	400	340	—	340
Total	6054	4075	—	4075

TABLE VI.

Summary relating to Children medically inspected during the Year 1922.

	Routine	Special	Total
(1) The total number of children medically inspected	1634	3481	5115
(2) The number of children in (1) suffering from defects (other than uncleanliness or defective clothing or footgear) who require to be kept under observation (but not referred for treatment)	691	669	1360
(3) The number of children in (1) suffering from :—			
Malnutrition	44	2	46
Skin Disease	37	1317	1354
Defective Vision (including Squint)	128	94	222
Eye Disease	46	147	193
Defective Hearing	14	30	44
Ear Disease	25	95	120
Nose and Throat Disease	366	114	480
Enlarged Cervical Glands (non-Tubercular)	150	84	234
Defective Speech	13	7	20
Dental Disease	907	197	1104
Heart Disease—Organic	27	6	33
—Functional	7	—	7
Anaemia	6	—	6
Lung Disease—Non-Tubercular	44	54	98
Tuberculosis : Pulmonary—Definite	1	11	12
—Suspected	15	42	57
Non-Pulmonary	2	12	14
Disease of the Nervous System	9	14	23
Deformities	43	13	56
Other Defects and Diseases	35	963	998
(4) The number of children in (1) who were referred for treatment (excluding uncleanliness, defective clothing, etc.)	1230	2529	3759
(5) The number of Defects found in children in (4) which received treatment (excluding uncleanliness, defective clothing, etc.)			4075



TABLE VII.

Record of Work at Poole and Branksome Minor Ailment Treatment Centres.

Defect or Disease		Poole		Branksome		Total	
		No. of Individual Children	No. of Consultations	No. of Individual Children	No. of Consultations	No. of Individual Children	No. of Consultations
SKIN	Malnutrition	2	2	—	—	2	2
	Uncleanliness—Head	47	184	44	173	91	357
	—Body	5	5	5	9	10	14
	Ringworm—Head	52	237	23	131	75	368
	—Body	36	137	18	77	54	214
	Scabies	24	80	42	177	66	257
	Impetigo	46	292	33	112	79	404
	Injuries	181	877	91	272	272	1149
	Septic Sores	389	2898	240	921	629	3819
	Other Skin Diseases	84	482	58	164	142	646
EYE	Blepharitis—Septic Eyelids	37	175	57	229	94	404
	Conjunctivitis	19	105	10	26	29	131
	Corneal Ulcer	—	—	—	—	—	—
	Defective Vision	44	62	38	47	82	109
	Squint	9	12	3	4	12	16
	Other Eye Conditions	6	16	18	36	24	52
EAR	Cerumen	21	64	9	19	30	83
	Otitis Media	41	298	28	101	69	399
	Other Ear Diseases	19	61	7	11	26	72
NOSE AND THROAT	Enlarged Tonsils and Adenoids	56	103	58	104	114	207
	Sore Throat	103	196	70	116	173	312
	Swabs taken in Clinics	131	—	28	—	159	—
CHEST	Adenitis	46	148	38	114	84	262
	Defective Teeth	120	153	77	98	197	251
	Defective Speech	7	9	—	—	7	9
	Morbus Cordis	1	1	5	10	6	11
	Bronchitis	19	40	35	73	54	113
	Pre-Tuberculous	19	55	23	110	42	165
	Tuberculosis of Lungs	6	9	5	23	11	32
	Other forms of Tuberculosis	7	47	5	18	12	65
	Nervous Diseases	8	15	6	18	14	33
	Deformities and Rickets	5	14	13	25	18	39
	Common Infectious Diseases	234	493	101	230	335	723
	Mentally Defective Children	6	6	2	2	8	8
	Advice and Various	290	922	330	1251	620	2173
	Totals	1989	8198	1492	4701	3481	12899

TABLE VIII.

Statistics of Attendance, etc.

School		Accommodation	Average Attendance	No. Register at end of year
Hamworthy	Mixed Department	231	192	} 294
"	Infants	170	55	
St. James'	Girls	243	196	218
"	Infants	120	120	147
St. Mary's R.C.	Mixed	101	95	101
St. Paul's	Infants	190	116	140
National	Boys	283	221	242
South Road	Boys	290	280	312
"	Girls	290	298	336
Lagland Street	Infants	249	185	227
Longfleet	Boys	240	163	175
"	Girls	153	135	143
"	Infants	170	138	167
Oakdale	Mixed	230	188	219
St. Peter's	Boys	213	141	147
"	Girls	149	135	149
"	Infants	140	98	119
Branksome Heath	Boys	230	202	253
"	Girls	258	220	240
"	Infants	190	153	180
Courthill	Mixed	400	371	406
"	Infants	250	170	198
Martin Road	Mixed	320	231	269
Heatherlands	Boys	312	279	308
"	Girls	300	272	284
"	Infants	300	218	263
St. Aldhelm's	Boys	232	221	233
"	Girls	201	199	211
"	Infants	218	132	157

